

Medicare Hospital

INFORMATION

Report

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MEDICARE HOSPITAL INFORMATION

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Volume 3



ARIZONA



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STATES BY VOLUME

VOL	STATE	VOL	STATE
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FOREWORD

The mission of the Health Care Financing Administration (HCFA) is to promote the timely delivery of appropriate, quality health care to the nation's aged, disabled, and poor. The agency must also ensure that beneficiaries are aware of the services for which they are eligible, that those services are accessible, and that agency policies and actions promote efficiency and quality within the total health care delivery system.

To that end, the annual release of the Medicare Hospital Information report is a key element in our continuing efforts to improve the effectiveness of medical practice and the quality of care provided to Medicare beneficiaries. It is also an important step in helping beneficiaries make more informed health care decisions.

The information in this release is not intended as a direct measure of quality of care. It is best used as a "screening tool"—that is, to identify potential problems for further review and, in consultation with medical staff, to evaluate a hospital's strengths and weaknesses. Thus, we believe that consumers can use this information to ask questions of their physicians, rather than reach judgments about the quality of care in a particular hospital. We also expect this information to be used by hospital administrators, physicians, peer review organizations, State survey and certification agencies, and researchers.

This publication presents information to answer the question "What is the actual mortality rate within a certain period of time for each hospital compared to the rate that would have been predicted, given what we know about the characteristics of the patients admitted?" Our basic approach to analyzing hospital mortality information has remained unchanged for the past five years; however, since the last publication of mortality information in May 1991, we have made some significant changes both in our methodology and in the way we display the results of our analysis. The four principal changes in the 1992 report are:

- A graphic presentation of the predicted and observed mortality rates for most hospitals for "All Causes" for Federal fiscal years 1988-1990 at 30, 90, and 180 days;
- The addition of information on certain variables that we use in computing the predicted mortality rates for each hospital;
- The addition of information on the geographic origin of each hospital's patients; and

- A comparison of the average length of stay in each hospital with the average for the State and Nation.

These refinements should make this information an even more valuable educational tool to help improve the quality of care in hospitals. The changes were reviewed by a panel of outside experts. The methodology used to calculate the observed mortality rate, the predicted mortality rate, and the standard deviation are briefly described in the Technical Information section of the Introduction to this volume and in more detail in the Technical Supplement (Volume 55).

We acknowledge the assistance we have received from the American Hospital Association—not only for providing the information detailing selected hospital characteristics, but also for alerting its members to the importance of this information. We are also grateful to the personnel in each hospital who took the time to review the data thoroughly and to provide us with comments and suggestions. As before, we have published individual hospitals' comments in their respective State volumes. Over the years, these communications have helped to improve and refine the information included in this publication.

HCFA is committed to improving the Medicare Hospital Information report. To that end, we are continuing to work with representatives of hospital, consumer, employer and other organizations to make this annual report as useful as possible for all consumers.

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INTRODUCTION

The Medicare Hospital Information report contains information on acute care hospitals that treated Medicare patients discharged in Federal fiscal year (FY) 1990 (October 1, 1989—September 30, 1990).

This year's publication set consists of 54 State volumes and a Technical Supplement (Volume 55). There is one volume per State, except that California and Texas have two volumes each, Hawaii is combined with American Samoa and Guam, and Puerto Rico and the Virgin Islands are combined together in one volume.

Each hospital's two summary data pages are arranged alphabetically by hospital name in each State volume. These data pages consist of:

- The hospital's FY 1990 Medicare hospital mortality rates;
- A graphic presentation of the predicted and observed mortality rates for most hospitals for "All Causes" for FYs 1988—1990 at 30, 90, and 180 days;
- The FY 1990 values for selected explanatory factors used to predict the mortality rates;
- Origins and lengths of stays of Medicare admissions; and
- Hospital characteristics, such as the number of beds and other characteristics, which we obtained from data contained in the American Hospital Association's (AHA) 1990 Annual Survey of Hospitals files or, when such information was not available from the AHA file, the Health Care Financing Administration's (HCFA) Online Survey, Certification and Reporting System (OSCAR) file.

Please note that the information regarding origins and lengths of stays and hospital characteristics are presented strictly for information purposes only. They were not used to calculate the hospital's predicted mortality rates.

Toward the end of each volume, we include both State and national mortality rates developed by our analysis, as well as the comments we received from individual hospitals.

DESCRIPTION OF MORTALITY INFORMATION

The mortality rates at a given hospital may reflect, among other factors, the age, sex, diagnoses, and severity of illness of patients admitted to that hospital, as well as the quality of care they received. Factors affecting health and the probability of death vary among the patient populations served by individual hospitals. Consequently, the mortality rates in different patient populations vary considerably.

These latest analyses of the mortality rates associated with Medicare hospitalizations are similar to those carried out in the four prior years. Only one hospitalization for every patient was used. As in last year's analysis, when a patient had multiple hospitalizations during the fiscal year, one stay was selected at random to be analyzed. We believe that the use of the randomly selected admission provides a better representation of a typical hospital admission and permits us to calculate mortality rates more nearly like those the hospital itself would calculate for its patients.

Although we publish data only on deaths which occur within 180 days of admission to the hospital, for purposes of analysis our methodology actually considers deaths which occur any time within 365 days of admission (with the exception that no date of death later than April 1, 1991 is used). This is part of the formula which assesses the long-term risk of mortality. With this approach, information about the early and later results of the hospitalization is provided. This is important because diseases evolve with different time courses, and treatments may have different short- and long-term effects. The choice of at least 180 days allows substantial followup consistent with timely reporting of HCFA data.

We again analyzed the data on a fiscal year, rather than on a calendar year, basis because it allows us to report on recent hospitalizations. Also, new Medicare rules are often instituted on a fiscal year basis.

For each hospital, mortality rates are presented for overall Medicare patient mortality and for eight medical conditions and nine procedures. The information consists of the number of Medicare patients; the observed or actual mortality rate (OBS); the predicted mortality rate (PRED), given the mix of patients; and a standard deviation (SD), a measure of the uncertainty of the predicted rate.

The following information will be helpful when reviewing specific information for any given hospital.

Number Of Cases

This is the number of individual Medicare beneficiaries whose discharge in a fiscal year from the short-term, acute care hospital listed was selected for analysis. The total number of cases randomly selected for each hospital is presented under the category "All Causes." The eight medical condition and nine surgical procedure categories are subgroupings drawn from the "All Causes" selection. Although a particular patient may appear in only one of the eight medical condition categories, that same patient may also appear in one or more of the nine surgical procedure categories. Similarly, a patient may appear in one or more of the nine surgical procedure categories, even though he or she was not included in any of the eight medical condition categories.

The categories chosen for display represent HCFA's interpretation of the categories judged to be important by various outside advisors including the Institute of Medicine. The listed condition and procedure categories do not cover the reason for admission of all the hospitalized Medicare patients in this study. (The ICD-9-CM codes included in each condition and procedure category appear in Table 1 following this Introduction section.)

These conditions and procedures represent the causes for the hospital admission and/or surgical episodes during that stay; they do not necessarily represent the cause of death. HCFA does not have access to cause of death information.

Observed Mortality Rate (OBS)

The observed mortality rate for each category is the percentage of each acute care hospital's selected Medicare patients who died within 30, 90, or 180 days of the selected admission. This rate does not represent the percentage whose death was caused by a particular condition or procedure.

The percentage is rounded to the nearest one-tenth of one percent. Both inhospital deaths and deaths occurring after discharge but within 30, 90, or 180 days of admission are included. For example, if a hospital had 1,000 patients included in the "All Causes" category and 124 of these patients died within 30 days of the selected admission, the 30-day observed mortality rate would be 12.4 percent; if an additional 17 patients died more than 30 but less than 91 days after admission, the 90-day observed mortality rate would be 14.1 percent; and if an additional 13 patients died more than 90 but less than 181 days after admission, the 180-day observed mortality rate would be 15.4 percent.

It is important to note that the observed mortality rate is cumulative; e.g., the 90-day observed mortality rate includes all deaths which occur within 30 days of admission, as well as those occurring more than 30 and less than 91 days after admission.

Predicted Mortality Rate (PRED)

The predicted mortality rate for each hospital's patients is derived in part by determining, based on national experience, the contribution to the probability of dying associated with various patient characteristics such as:

- Principal diagnosis (grouped into 23 analytical risk categories),
- Age,
- Sex,
- Previous hospital admissions within the prior six months,
- Admission source (e.g., physician reference, skilled nursing facility reference),
- Admission type (e.g., elective or emergency), and
- The presence of up to seven comorbid conditions—cancer, chronic cardiovascular disease, chronic renal disease, chronic liver disease, chronic pulmonary disease, cerebrovascular degeneration, and chronic diabetes. A list of the ICD-9-CM codes defining the comorbid conditions is in Table 2 following this Introduction section.

Standard Deviation (SD)

The standard deviation is a tool to gauge the extent to which the difference between the observed and predicted mortality rate is meaningful. In general, the greater the difference between the two rates, the greater the probability that the difference represents an actual variation from what would be expected in view of the national experience. The less chance that the difference between the PRED and the OBS can be attributed to statistical variability, the more grounds for possible concern about the institution's performance.

Information on how to use the SD to construct prediction intervals for use in assessing the real difference between the OBS and the PRED is included in the Technical Information section of this Introduction. The precision and interpretability of the estimates are weaker when there are no deaths or 50 or fewer cases in a particular category being analyzed. Thus, for these instances, dashes ("---") are placed in the SD column.

OBSERVED MORTALITY RATE AND PREDICTED RANGE FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

Also in this year's report, we have presented graphs that display the information for most hospitals described above for FYs 1988 and 1989, as well as FY 1990. (In particular, these graphs could not be computed for hospitals that had 50 or fewer cases or no deaths in FYs 1988, 1989, or 1990). In constructing the graphs, we used 2 times the standard deviation to approximate a 95 percent prediction interval. The observed mortality is shown as a dot (•). The predicted mortality is shown at the middle of a range of mortality rates. The bottom of the range is the predicted mortality minus twice the standard deviation, and the top of the range represents the predicted mortality plus twice the standard deviation. The graphs for FY 1988 and FY 1989 are based on new random samples and new computations for this year's report. Thus, the calculations for some hospitals for FY 1988 and FY 1989 may be different from previous releases, because we are including more current data in this year's report.

FY 1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

This year's report includes the FY 1990 average at each hospital of many of the explanatory factors used to predict that hospital's mortality rates. This information provides a profile of the patients used in the analysis and should help to identify possible systematic coding errors in the claims data used to calculate the mortality rates. These percentages are derived from the patients included in the sample and should be applied to the total number of cases listed in "All Causes." It is important to note that neither the admission sources/types nor the comorbidities categories are mutually exclusive. For example, a patient could be both "referred by his personal physician" and "admitted for elective procedure." Similarly, a patient could have secondary diagnoses of both cancer and diabetes.

INFORMATION SOURCES AND NOTES

We believe that when the mortality rate information is properly understood and applied, it can be very useful; it can also be misleading if it is interpreted incorrectly. The information simply describes one of several possible outcomes at a hospital—postadmission mortality for Medicare beneficiaries.

Mortality information is not necessarily representative of a hospital's total performance in all aspects of patient care. Individual hospitals may have very good reasons for their rates being higher than the rates predicted by the HCFA model. For example, one hospital might have different death rates than another because its patient mix is not fully accounted for by the model.

Accordingly, we offered each hospital the opportunity to review their specific information and to provide comments to HCFA and the public, and we included those comments that were received timely at the end of this volume. Users should read the discussions about the uses and limitations of the mortality information found on page xiii, as well as any comments a hospital may have provided.

Hospitals In The Analysis

The hospitals included in this analysis are participating in Medicare as short-term, acute care facilities—all have a zero in the third position of their Medicare provider number. All other hospitals—those with something other than a zero in the third position of their provider number, such as rehabilitation facilities or psychiatric institutions—were excluded. This year, as in the past two years, we have also excluded hospices.

In some cases, we have included data for hospitals that closed, changed ownership, or changed management either during or subsequent to FY 1990. Our data included for those institutions reflects the situation as it existed at the time the hospitalizations analyzed occurred.

Data Sources

This report is based primarily on Medicare hospital billing information for Federal fiscal years 1988, 1989, and 1990. While the principal source of the data for the analysis was the HCFA-maintained Medicare Provider Analysis and Review (MEDPAR) file, which contains information about each Medicare hospitalization, some of the information about beneficiaries, such as date of death, was obtained from the Social Security Administration. Hospitals submit bills to HCFA's fiscal intermediaries (which handle claims for the inpatient care provided to Medicare beneficiaries) which, in turn, submit this information to HCFA. The file is updated on a quarterly basis. Our analysis was based on information available following the June 1991 update of the MEDPAR file. It is estimated that by that time (nine months after the close of the fiscal year), 98 percent of all Medicare discharges in FY 1990 are included in the file.

Possible Limitations Of The Data

In any large-scale data base, such as the one dealing with Medicare hospitalizations, there will be gaps or inaccuracies. For example, last year some hospitals had not accurately reported the source or type of admission, and thus erroneous information was included in the analysis for those hospitals. However, the fact that the files contain information on about 10 million hospital admissions to nearly 6,000 hospitals for each year provides some assurance that, for purposes of the statistical analysis conducted here, the information that might be

missing or inaccurate is such a small portion of the total that it would have little effect on the results for national estimates. Nevertheless, it may substantially affect an individual hospital if it were the source of the inaccurate information.

While we feel that the information used in this analysis is thorough and complete, there are a few points to keep in mind as you review the mortality information.

The information used is billing data; it is only as good as the information submitted by hospitals as part of the payment process. Although there is always a possibility that coding errors are included, we assume that, given the link to payment, hospitals have an incentive to submit bills accurately and promptly. We do know, however, that some hospitals submitted incomplete or erroneous data.

For example, following last year's public release of the hospital mortality data, several hospitals wrote to HCFA indicating that they had submitted incorrect data. Furthermore, they stated that if they had given us the correct information, their predicted mortality rates would have been higher than those presented in HCFA's report. Therefore, in this year's report we have annotated those hospitals' data pages with a footnote stating: "This hospital says that it submitted inaccurate data to Medicare and claims that its predicted mortality rate should be higher than that presented above." At this point, however, HCFA cannot confirm the validity of those hospitals' claims. The analysis results might very well be different if the data on which they were based were submitted accurately by those hospitals.

In our previous analysis of mortality data, we discovered that some States had zero admissions from a skilled nursing facility. While some of these problems were corrected on the MEDPAR files used for this analysis, at the time this study was initiated we found empirical evidence that some of the files still contained suspect information. The suspect data were identified by noting those months (date of discharge) and fiscal intermediaries for which the type and source of admission fields appeared to be interchanged. Based on our findings, we reversed these fields to at least partially correct the remaining discrepancies. The following list shows the specific instances for which the fields were reversed for this analysis.

TYPE AND SOURCE OF ADMISSION FLIPPED

<u>FI No.</u>	<u>FI Name</u>	<u>Dates</u>
00030	Arizona Blue Cross	10/01/86 — 12/31/88
00080	Maryland Blue Cross/DC	06/01/87 — 09/30/87
00190	Maryland Blue Cross	06/22/87 — 12/31/88
00400	Texas Blue Cross	12/07/87 — 12/31/88

HOW TO USE THIS INFORMATION

There are several key points to remember about the use of this information. First, it is important to understand that the difference between the hospitals' mortality rates and the predicted rates in the tables in this report may not be a direct measure of the quality of care rendered in the hospitals.

Second, the usefulness of this information depends upon the accuracy with which mortality rates can be predicted. We do not currently have any direct measurement tool with which we can fully adjust for severity of patient illness differences among hospitals. For instance, two hospitals may have very different death rates for patients admitted for stroke, even after we have adjusted for age, sex, and several other factors. This might happen because one hospital's stroke patients may consist of a significant number who are admitted in a coma (and are thus more likely to die), whereas another hospital's patient population may represent a broader spectrum of patients with cerebrovascular problems, or because these two hospitals, in fact, do provide different levels of quality of care. In addition, other factors affecting the probability of death in a particular case (e.g., family status/support, overall health status of the patient, etc.) are not included in the predictive model because information on them is not readily available.

Nevertheless, we believe that the information presented in this publication is an important contribution to the health care community and should be helpful to a wide range of individuals and organizations including consumers, hospital administrators, physicians, PROs, and researchers.

Use By Consumers — Some Key Questions

Consumers should read carefully the explanations of the uses and limitations of the information. Listed below are some questions that we recommend a consumer think about before choosing a hospital. Please keep in mind that this is not a comprehensive list, but it should serve to illustrate the types of questions that are important to consider.

- Why are the hospital's observed mortality rates for "All Causes" consistently and significantly above the predicted rates for FY 1990?
- Why are the hospital's observed mortality rates for the condition for which I need treatment or the procedure I will undergo consistently and significantly above the predicted rates for FY 1990?
- How does this hospital's pattern of mortality compare with that of other hospitals in the State and Nation?

- Is the number of cases too small to present a satisfactory picture of the hospital?
- Does the hospital treat a large number of cases in the category for which I need treatment?
- Does the hospital treat a large number of patients who have several co-existing illnesses or who otherwise are likely to be "sicker" than average?

Other Users Of This Publication

Among other users of this publication, we expect that the hospital administrator (in consultation with medical staff) will find the information most useful as a screening tool to evaluate a hospital's strengths and weaknesses. We know that some hospitals and their medical staffs, using established and newly emerging quality assessment techniques, are seeking information that will result in improved health care delivery.

Outside Assistance In Developing This Publication

The development and presentation of the Medicare Hospital Information report continues to be an important part of HCFA's responsibilities in the health care community. To make the information as accurate and useful as possible, over the past several years we have discussed the theoretical framework and statistical approach with a number of nationally recognized technical experts in appropriate fields. Based on their recommendations, we believe that the models used in these analyses continue to be reasonable and appropriate.

In the past, we have conducted validation studies of our methodology. In general, these studies have found correlation between poor quality care and hospitals whose observed mortality rates significantly exceed the rates that would have been predicted. However, we have also found that detailed clinical data which more thoroughly characterize the severity of patient's illness, while they do not materially affect results describing the general pattern of mortality, do, in specific instances, alter our assessment of the comparison of the observed to the predicted mortality rates.

The format for presentation, the process for sharing the information with individual hospitals, and the statistical methodology have been discussed at various meetings with leaders of organizations representing Medicare beneficiaries, physicians, and hospitals. Also, we have spent many months reviewing the comments received from the hospitals regarding their patient-specific data for earlier years and our previous mortality information reports. Many suggestions from these sources have been incorporated into this report.

We have carefully investigated comments from individual hospitals on apparent discrepancies or errors generated in previous years. These discrepancies rarely had an effect on a hospital's overall mortality rate. Most of these instances fell into the following two broad categories.

- **Inaccurate Date of Death** — We found that inpatient billing coding errors (e.g., a hospital bill indicating that the patient's status at time of discharge was "expired" when the patient had, in fact, left the hospital alive) created many of these errors. We now have mechanisms in place that allow a continuous update of HCFA's master file, thereby enabling us to make corrections.
- **Discrepant Case Counts** — Our analysis counts only one acute care discharge in a fiscal year; normally, hospitals count each discharge. Thus, a patient admitted three times in a year would count three times for the hospital, but only once for the purpose of analyzing Medicare hospital mortality data presented in this report.

We believe it is important for consumers of health care to have access to as much information about hospitals as possible when making health care choices. Along with hospital characteristics information, we have added this year information about the origin and length of stay of Medicare admissions. This information is presented for comparative purposes only and was not used in calculating a hospital's predicted mortality rates. These data were not part of the analyses, and any errors or discrepancies in them do not affect the predicted mortality rates.

ORIGIN OF MEDICARE ADMISSIONS

Data on the geographic origin of each hospital's patients are presented in this year's report. We obtained from the Health Insurance Master file the State and county of residence for each Medicare beneficiary discharged from a Medicare-certified, acute care hospital during FY 1990. We then compared that information with the location of the hospital to determine the percentage of all discharges where the patient lived within the same city/county as the hospital location, within the State where the hospital is located, or outside the State. The percentages are derived by dividing the number of discharges of beneficiaries in a geographic category by the total number of Medicare discharges from the hospital. Please note that these are percentages of total Medicare discharges, not of the mortality sample alone.

MEDICARE AVERAGE LENGTH OF STAY

We obtained from the MEDPAR file the total days of care—both Medicare covered and noncovered—and divided that total by the number of discharges from each hospital. Total, rather than covered, days were used because, under the Prospective Payment System (PPS), if a Medicare patient has at least one day of hospital coverage available to him in the current spell of illness, the hospital will be paid the full diagnosis related group (DRG) amount plus any approved outlier amount, regardless of the number of days actually used.

Example: Hospital A had 2,513 Medicare discharges with a total of 24,379 days.

$$\text{Calculation: } \frac{24,379}{2,513} = 9.7 \text{ days}$$

The Medicare average length of stay is 9.7 days.

HOSPITAL CHARACTERISTICS

As noted previously, we have again included information on selected hospital characteristics such as the number of beds, occupancy rate, ownership, staffing, and specialty services. This information was obtained from the American Hospital Association's (AHA) 1990 Annual Survey of Hospitals, with the exception of the case mix index (CMI), which was derived from HCFA billing data. This file consists of information voluntarily reported by hospitals to the AHA. In instances where AHA data were unavailable, for example for hospitals that did not respond to the AHA survey, we derived the information from HCFA's Online Survey, Certification and Reporting system (OSCAR). The hospital characteristics and the specific special services listed were selected with the concurrence of the AHA as being those most meaningful to the Medicare population. Information on these specific data elements follows.

AHA Definitions (except for CMI)

Survey and Year — AHA 1990. Source is the American Hospital Association's 1990 Annual Survey of Hospital files.

Profile

Total beds (#) — Number of beds (including subacute beds), cribs, and pediatric and neonatal bassinets regularly maintained (set up, staffed, and ready for use) for inpatients as of the close of the reporting period; does not include bassinets for normal newborn infants.

Occupancy rate (percent) — Ratio of average daily census to the average number of beds (statistical beds) maintained during the 12-month reporting period. (NOTE: The number of these "statistical beds" may differ from the bed count at the close of the reporting period.)

Ownership/control — State government, local government, district/authority, church, private nonprofit, private for profit, or Federal Government.

Medicare discharges — The total number of inpatient discharges for Medicare patients for those hospitals selected for the mortality calculations, including all discharges for persons with more than one hospitalization during the year. (The mortality data include only one randomly selected discharge for each hospitalized enrollee. Therefore, this figure may reflect more discharges than the actual number of cases randomly selected for the mortality study.)

Case mix index (CMI) — A measure of the overall complexity of the Medicare cases treated by a given hospital compared to the complexity of the national average case mix. The CMI represents the relative costliness of each hospital's mix of cases compared to the national average mix of cases. A CMI of greater than one means that a hospital treats more complex cases than average. A CMI of less than one means that a hospital treats less complex cases than average. The CMI for each hospital is calculated on an annual basis. In this report, the CMI presented for each hospital is calculated based on its discharges in FY 1990.

A hospital's CMI is calculated by multiplying the number of cases in each DRG by the relative weight of that DRG, summing the products, and dividing the sum by the total number of cases for the year. For calculating the FY 1990 CMI, use the DRG relative weights published in the *Federal Register*, Volume 54, Number 169, pages 36468 ff., dated September 1, 1989.

Staffing (all AHA counts are as of 9/30/90)

Total number of physicians — Total active and associate medical staff.

Percent of physicians who are board-certified specialists — Physicians who have passed an examination given by a medical specialty board and have been certified by that board as a specialist.

Medical residents/interns — Full-time equivalent (FTE) medical residents or interns.

Registered nurses — Full-time equivalent (FTE) registered nurses.

Licensed practical nurses — Full-time equivalent (FTE) licensed practical nurses.

Specialty Services

Burn Unit — Provides more intensive care to severely burned patients than the usual acute nursing care provided in medical and surgical units. Beds must be set up and staffed in a unit specifically designated for this service.

Cardiac Intensive Care — Provides patient care of a more specialized nature than the usual medical and surgical care, on the basis of physicians' orders and approved nursing care plans. The unit is staffed with specially trained nursing personnel, and contains monitoring and specialized support or treatment equipment for patients who, because of heart seizure,

open-heart surgery, or other life-threatening conditions, require intensified, comprehensive observation and care. May include myocardial infarction, pulmonary care, and heart transplant units. Beds must be set up and staffed in a unit(s) specifically designated for this service.

Comprehensive Geriatric — Provides diagnostic and evaluation services that determine elderly patients' long-term care needs. It includes the assessment of medical conditions, functional activities, and mental and emotional conditions, and incorporates these into a treatment plan which includes family and financial concerns as well as medical needs.

Hospice Care — A program providing primarily medical relief of pain and support services to terminally ill patients and assistance to their families in adjusting to the patients' illness and death.

Medical/Surgical Intensive Care — Provides nursing care to adult and/or pediatric patients of a more intensive nature than the usual medical, surgical, pediatric, and/or psychiatric care on the basis of physicians' orders and approved nursing care plans. Included are medical-surgical, pediatric, and psychiatric (isolation) units. These units are staffed with specially trained nursing personnel, and contain monitoring and specialized support equipment for patients who, because of shock, trauma, or life-threatening conditions, require intensified, comprehensive observation and care. These units may also include cardiac care when such services are not approved in a distinct cardiac care unit. This category is called "intensive care unit" in OSCAR.

Organ/Tissue Transplant — The hospital has the necessary staff and equipment to perform the surgical removal of a viable human organ or tissue from a donor, either living or deceased, and the surgical grafting of the organ/tissue to a suitably evaluated and prepared patient.

Other Intensive Care — Provides nursing care to adult and/or pediatric patients with a specialized disease or condition of a more intensive nature than the usual medical, surgical, pediatric, and/or psychiatric care on the basis of physicians' orders and approved nursing care plans. Examples reported include oncology or spinal cord injuries. These units are staffed with specially trained nursing personnel and contain monitoring and specialized support equipment appropriate for the patients' specialized conditions.

Trauma Center — Provides emergency and specialized intensive care to critically injured patients.

Other Specialty/Hospital-Based Services

Alcohol/Drug — Hospital services for the medical care and/or rehabilitative treatment of outpatients whose primary diagnosis is alcoholism or other chemical dependency.

Rehabilitation — A unit having designated beds and providing a comprehensive array of multidisciplinary medical rehabilitation services.

Psychiatric — Care provided to emotionally disturbed, chronically mentally ill, mentally disordered, or other mentally incompetent patients on the basis of physicians' orders and approved nursing care plans. Beds must be set up and staffed in units specifically designated for this service.

Medicare Swing Beds — The hospital is certified by Medicare to provide "swing bed" services; that is, some acute care beds can be used for skilled nursing facility type care in the hospital for Medicare purposes.

OSCAR Definitions (except for CMI)

Survey and Year — HCFA, most recent year. Data were derived from the Online Survey, Certification and Reporting System (OSCAR).

Profile

Total beds (#) — Total number of operational beds eligible for Medicare payment.

Ownership/control — Church; private, nonprofit; other nonprofit; proprietary; Federal Government; State government; local government; and hospital district or authority.

Case mix index (CMI) — See definition shown in AHA "Profile" section.

Staffing

Medical residents/interns — Full-time equivalent (FTE) medical residents or interns.

Registered nurses — Full-time equivalent (FTE) registered nurses.

Licensed practical nurses — Full-time equivalent (FTE) licensed practical nurses.

Specialty Services

NOTE: There are no specific definitions of specialty services in OSCAR. Characteristics are self-reported by each hospital at initial Medicare certification and recertification, and are generally understood to parallel the explicit AHA definitions (above). The AHA categories “comprehensive geriatric” and “other intensive care” are not available in OSCAR. However, they may be included in the OSCAR category of other specialty services (not shown in table).

Coronary Care — See definition shown in AHA “Specialty Services” section.

Intensive Care Unit — See definition shown in AHA “Specialty Services” section. These units may also include other intensive care units in OSCAR reporting.

Organ Transplant — See definition shown in AHA “Organ/Tissue Transplant” section. May include tissue transplants because there is not a separate field in OSCAR for these services.

TECHNICAL INFORMATION

DATA SOURCES

The data analyzed in this report are obtained from the Medicare Provider Analysis and Review (MEDPAR) file for the fiscal years 1987-1990, which contains information on the hospital stays of Medicare beneficiaries. The principal sources of data for this file are the bills (known as HCFA-1450 or UB-82) submitted by the hospitals to HCFA through fiscal intermediaries. The MEDPAR file also contains data about the beneficiaries, such as age, sex, and date of death, which are obtained from the Social Security Administration, the Railroad Retirement Board, or the Office of Personnel Management.

Hospital stays with discharges in fiscal years 1988, 1989, and 1990 were used in these analyses. Hospital stays in 1987 were used only to characterize the prior admissions of the patients in the 1987 cohort. Only acute care hospital stays in short-term (general and specialty) hospitals were selected. These hospitals have a "0" in the third position of their Medicare provider number. Hospital stays in institutions (designated by a "9" in the fourth position of the provider number) and hospital stays in psychiatric units, rehabilitation units, swing-beds and alcohol/drug units (with "special unit codes" of S, T, U and V, respectively, in the third position) were excluded.

THE MORTALITY MODEL

For each beneficiary in each year one hospitalization was selected at random. Choosing a specific hospitalization is necessary to avoid multiple counting of the same death for that year. Selecting a random hospitalization instead of the first or last in the year produces mortality rates that are more representative of the rates that a hospital might calculate for its patients. Also, the mortality rates based on this random selection process reflect an intermediate position between the rates produced by the alternatives.

The selected hospital stays were analyzed separately by analytical category. The analytical categories were created by grouping ICD-9-CM diagnosis codes that had similar mortality patterns. The procedures for creating the analytical categories and the groups of ICD-9-CM diagnosis codes that defined them are detailed in the Technical Supplement.

The mortality experience of the patients was evaluated as a function of time within 365 days of the admission. The factors included in the mortality model used to evaluate each patient's probabilities of death are given in Table 3. They consist of demographic characteristics (age and sex), major comorbidities (chronic diseases likely to have been present at admission and believed to

complicate management and increase the likelihood of an adverse outcome), prior admissions (grouped into five risk or severity levels) within the 6 months preceding the admission evaluated, admission type (emergent, elective, etc.), and admission source (referral from the physician's office, the nursing facility, etc.). The specific reason for the admission (the principal diagnosis) and the performance of selected surgical procedures were additional factors used in the estimation of the predicted probability of death (see below).

The observed mortality rate for a hospital was calculated by means of the lifetable method ("The LIFETEST Procedure," Chapter 22, SAS User's Guide: Statistics, Version 5 Edition, pages 529-557).

ANALYTIC TECHNIQUES

A time-to-event or survival model with explanatory or concomitant variables was used to ascertain the influence of the patient characteristics listed above on the probability of death. A feature of such a model is allowance for "right censored" observations. Generally, these are events or outcomes which would have occurred but for some interference that prevents further observation. In the present analysis, "right censoring" occurs when a patient is withdrawn alive from the study April 1, 1991 or at the end of the followup period of 365 days.

The survival function, $S(t)$, is one of several equivalent ways of expressing the model. Another form uses the cumulative distribution function or the mortality function

$$F(t) = 1 - S(t).$$

Another useful formulation of these models is the hazard function, $h(t)$, also known as the force of mortality or risk function. The hazard is the rate of decrease in the number of survivors relative to the number of survivors at a specific time. Mathematically, the hazard function is

$$h(t) = - \frac{1}{S(t)} \frac{dS(t)}{dt} = - \frac{d \ln(S(t))}{dt}.$$

The probability density function, $f(t)$, commonly used in statistical texts can be expressed as follows:

$$f(t) = \frac{dF(t)}{dt} = h(t)S(t).$$

The area under the survival curve is the expected value for t . In some cases, the area under the survival curve is restricted to an interval $0-t_1$ where t_1 might be one year, for example.

The specific time-to-event or survival model used in the present analysis is Bailey's modification of the Makeham model. The survival function for the Bailey-Makeham model is

$$S(t) = \exp\left\{-\delta t - \left(\frac{\alpha}{\gamma}\right)(1 - \exp(-\gamma t))\right\}$$

where

$$\alpha = \exp(\alpha_0 + \alpha_1 x_1 + \dots + \alpha_i x_i + \dots + \alpha_k x_k)$$

$$\gamma = \exp(\gamma_0 + \gamma_1 x_1 + \dots + \gamma_i x_i + \dots + \gamma_k x_k)$$

$$\delta = \exp(\delta_0 + \delta_1 x_1 + \dots + \delta_i x_i + \dots + \delta_k x_k)$$

are the expressions for each of the structural parameters α , γ , and δ in terms of the k concomitant variables x_i and their associated component parameters α_i , γ_i , and δ_i for $i=1, 2, \dots, k$ and three intercepts or component parameters α_0 , γ_0 , and δ_0 . The structural parameter δ is the long-term risk which is approached as $t \rightarrow \infty$. The structural parameter α is the initial excess risk which decays with rate constant γ .

For the survival function given above, the risk or hazard function has an especially tractable form of an exponential decay which approaches a long-term risk, δ . The hazard function corresponding to the survival function above is

$$h(t) = \alpha \exp(-\gamma t) + \delta.$$

The estimation of the component parameters was carried out in a series of steps in which those covariates which had estimable and statistically significant ($p < 0.05$) influences of the probability of death were identified for inclusion in the model. As the model for each of the 23 risk categories was estimated separately, different lists of covariates were used for the final core models.

This first step was followed by the estimation of the additional contribution of specific principal diagnoses in each risk category. In these analyses, the effects of the patient characteristics included in the core models were corrected for. Only those principal diagnoses were retained which were estimable and had more than 900 cases (more than 300 for codes identified by year). Similarly, after adjustment for the effects of both the variables in the core model and the principal diagnoses, correction terms were calculated to estimate the additional information about the probability of death associated with the categorization of the patients into the clinical groups used for the presentation of the data in the mortality tables (see below). These correction terms were negligible for the medical categories but substantial for the surgical categories.

Once the component parameters or regression coefficients α_i , γ_i , and δ_i have been estimated, the predicted probability of patient death at any specified time after admission, $1-S(t)$, may be calculated for all individuals. To obtain the predicted mortality rate up to a given time for a hospital, it is then only necessary to average over the predicted probabilities of death of its patients to that time.

The analytical categories are useful for grouping the patients into relatively risk-homogeneous strata for the regressions. However, to gain insights into patterns of practice at hospitals, the data are presented for patients grouped into clinically meaningful medical and surgical categories. The 17 clinical categories used in the mortality tables and defined in Table 1 were identified by the Institute of Medicine as being of particular medical and epidemiologic interest.

ESTIMATION OF THE STANDARD DEVIATION FOR PREDICTED MORTALITY

The standard deviation of the predicted mortality rate is used to assess how statistically different the observed mortality rate is from the rate predicted by the national experience with like patients. The standard deviation depends, in fact, on the variance of the residual or the difference between the observed, P , and predicted, $\hat{\Theta}$, mortality rates.

The residual has four components V_1 , V_2 , V_3 , and V_4 where V_1 is the variance of the estimate of the predicted probability of death. This computationally intensive term was negligible for nearly all cases, compared to other components of variance. Consequently, this term was not included in the present analysis.

V_2 is the binomial variance for n patients

$$V_2 = \frac{\hat{\Theta} (1 - \hat{\Theta})}{n}.$$

V_3 is the variation among hospitals not explained by the mortality regression models containing the patient characteristics described above.

$$V_3 = \widehat{\text{Var}(\Theta)} = \left(1 - \frac{1}{n}\right) \widehat{M_2(\Theta)}$$

where

$$\widehat{M}_2(\Theta) = \left\{ \left(\begin{array}{c} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics and} \\ \text{adjustment for hospital effects} \end{array} \right) - \left(\begin{array}{c} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics,} \\ \text{but omitting the hospital specific effects} \end{array} \right) \right\}^2 \left(\frac{1}{z_p^2} \right)$$

The quantity z_p corresponds to the statistical significance (p-value) of the hospital-specific effect.

V_4 is the variation not explained by the mortality regression models which each include, in addition, an indicator variable for the hospital:

$$V_4 = \left\{ (\text{Observed mortality}) - \left(\begin{array}{c} \text{Predicted mortality} \\ \text{on basis of} \\ \text{patient characteristics, and} \\ \text{adjustment for the hospital specific effects} \end{array} \right) \right\}^2$$

(The regression coefficients of the indicator variable for the hospital are a measure of the influence on the probability of patient death of factors not otherwise specified in the model. These factors include severity of illness not adequately reported on by the patient characteristics deduced from the claims data and the hospital's pattern of practice; i.e., performance.)

The standard deviation given in the mortality tables is just

$$SD = \sqrt{V_2 + V_3 + V_4}.$$

STANDARDIZED MORTALITY RATIO (SMR)

Another method of evaluating a hospital's performance—the Standardized Mortality Ratio (SMR)—is obtained by dividing the observed mortality rate by the predicted mortality rate. An SMR of one means the observed and predicted mortality are equal. A ratio greater than one means the observed mortality exceeds the predicted. A ratio less than one means the observed mortality is less than expected. The more extreme the ratio (significantly greater than one indicating unusually high mortality and significantly less than one indicating unusually low mortality), the greater the attention which should be paid to the results of this mortality report.

For each of the conditions and procedures, selected percentiles for the observed distribution of the SMR are displayed in Table 4. The selected percentiles provide benchmarks for comparison. For example, for a hospital

with 300 cases in the "All Causes" category, with observed mortality of 12.2 percent and predicted probability of 10.0 percent at 30 days, the standardized mortality ratio is

$$\text{SMR} = 12.2/10.0 = 1.22.$$

Note that an SMR of one means the observed and predicted mortality are equal, while a ratio greater than one means the observed mortality exceeds the predicted, and a ratio less than one means the observed mortality is less than expected. There will be greater interest in the more extreme ratios, either greater than one — excessively high mortality — or less than one — extremely low mortality.

From Table 4 for FY 1990, we find that the ratio is just below the 75th percentile of 1.23. Hence, slightly under 75 percent of the hospitals have an SMR less than that found at this hospital.

However, for a hospital with 900 cases in the "All Causes" category, with observed mortality of 19.3 percent and predicted probability of 10.0 percent at 30 days, the standardized mortality ratio is

$$\text{SMR} = 19.3/10.0 = 1.93.$$

Since the SMR of 1.93 is greater than the 97.5 percentile of 1.35 (Table 4 for 750 or more cases), there is cause for concern. To further assess this, we examine the displayed data in terms of the measure of uncertainty, the standard deviation.

MEASURES OF UNCERTAINTY

In principle, to use the standard normal approximations to determine prediction intervals, an adjustment must be applied for the skewness and kurtosis inherent in a mortality rate when the rate is considerably less than 50 percent and the number of cases is small. Table 5 presents the multiplicative factors, based on the binomial distribution, for the standard deviation needed to construct prediction intervals for the mortality rates at confidence levels of 75, 95 and 99 percent. Because of the approximations involved in the estimation of the skewness and kurtosis corrections, their precision decreases as the number of cases and the mortality rate decrease; i.e., as the value of the correction increases. In addition, because of simplifications and approximations in the estimation of the standard deviation, the precision of the multiplicative factors given in Table 5 exceeds the precision of the estimate of the standard deviation. Hence, the following rule-of-thumb represents an adequate approximation to the factors in Table 5 and an adequate guide to the statistical meaningfulness of the difference between the observed and the predicted mortality rates.

To illustrate the use of Table 5, consider a hospital with 75 cases and a predicted mortality of 13.0 percent with a standard deviation of 5.0 percent. Overall, for hospitals with patients with characteristics similar to those of this hospital, we would expect the actual or observed mortality rate to lie, 95 percent of the time, either between 13.0 percent and 22.9 percent if the actual is larger than the predicted, or between 3.3 percent and 13.0 percent if the actual is less than the predicted. That is because $22.9\text{ percent} = 13.0\text{ percent} + 1.98 \times 5.0\text{ percent}$, the factor 1.98 having been read from the section of Table 5 with the heading "95 Percent Prediction Interval" and "Factor for Upper Bound," the row "75" for the number of cases, and, by interpolation, between the "10 percent" and the "20 percent" predicted mortality rate columns. Similarly, $3.3\text{ percent} = 13.0\text{ percent} - 1.94 \times 5.0\text{ percent}$, the factor -1.94 having been read from the section of Table 5 with the heading "95 Percent Prediction Interval" and "Factor for Lower Bound" and the corresponding row and columns.

Therefore, in comparing the actual and predicted rates, more attention should be given to the hospital whose observed mortality rate lies beyond the bounds calculated for the 99 percent prediction interval than to the hospital whose observed mortality rate lies only beyond the bounds calculated for the 95 percent prediction interval. Likewise, more attention should be given to that hospital than to the hospital whose observed mortality rate lies only beyond the bounds calculated for the 75 percent prediction interval.

For the graphs, the observed mortality and an approximate 95 percent prediction interval are displayed. The prediction interval has bounds at the predicted mortality plus 2 times the standard deviation and at the predicted minus 2 times the standard deviation.

In the mortality rate tables, the observed and predicted mortality rates and the standard deviation as a measure for statistical importance of the difference are displayed for the overall and each of the conditions and procedures.

HOW TO OBTAIN MEDICARE HOSPITAL INFORMATION

The publication has been widely distributed to State health organizations and hospital and medical associations. The publication is available to the public for purchase in 55 volumes, with each volume being sold separately through the Government Printing Office (GPO). More detailed information about the purchase of this publication may be obtained by contacting:

Superintendent of Documents
Government Printing Office
Washington, D.C. 20402
Telephone: (202) 783-3238

As in prior years, the information appearing in the Medicare Hospital Information report is available in machine-readable/electronic format (tape and diskette). The Medicare Hospital Information public use file provides the published information as contained in the 55-volume hardcopy publication, except that the AHA's hospital characteristics are not on this file. Hospital characteristics from HCFA files (OSCAR) are provided instead. The files contain additional information which is useful for supplemental analyses: averages by hospital, MSA, and State for each of the variables used in the model, mortality rates for 15, 30, 60, 90 and 180 days, and cross-reference files which relate State, MSA, and ICD-9-CM codes used to a name. These data should allow analysts to assess an individual hospital's performance in comparison to all hospitals in the State or applicable MSA.

Also available to hospitals in machine-readable format is their patient-specific data that were used in the report. These data include the patient variables used in the analysis (e.g., the number and severity level of prior hospitalizations considered by the methodology, admission source and type, etc.) and the predicted probability of death at each time interval for each individual included in the study. With these data it is possible for hospitals to better understand their statistics. Due to confidentiality considerations, requests for patient-specific data must be forwarded on hospital letterhead, must include the institution's Medicare provider number, and must be signed by the hospital administrator.

For information about obtaining Medicare Hospital Information electronic media data, please contact HCFA's Bureau of Data Management and Strategy at:

Health Care Financing Administration
Bureau of Data Management and Strategy
Office of Statistics and Data Management
3-A-10 Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207
Telephone: (410) 597-5151

Table 1

DIAGNOSTIC AND PROCEDURE CATEGORIES

The following lists the ICD-9-CM diagnostic and procedure codes used to classify and group patients for presentation

CONDITION/PROCEDURE	ICD-9-CM CODES <i>(D)=Diagnosis code (P)=Procedure code</i>
Heart Disorders/Procedures	
Acute Myocardial Infarction (AMI)	All of 410 (D) (on 10/1/89 exclude 410 with 5th digit of a 2)
	<i>Note: For code 410 a 5th digit was added on October 1, 1989.</i>
Congestive Heart Failure (CHF)	398.91, 402.01, 402.11, 402.91, 428.0, 428.1, 428.9 (all D)
Angioplasty (ANGPLSTY)	All of 36.0 (P) excluding 36.00, 36.03, 36.04, 36.09 (all P)
	<i>Note: Code 36.0 had a 4th digit added on October 1, 1986. Code 36.0 got digits of 0, 1, 2, 3, and 9, and code 36.04 got some previously coded cases of 39.97. On October 1, 1987, code 36.01 was divided into 36.01 and 36.05, and some cases from 36.02 were put into 36.05.</i>
Coronary Artery Bypass Graft (CABG)	All of 36.1(P) and not Angioplasty (see above)
Pacemaker Insertion, Initial (PACE)	37.73, 37.74, 37.75, 37.77 (after 10/1/87 use 37.70 through 37.73) (all P)
	<i>Note: Code 37.70 was restructured on October 1, 1987. Previously the code contained both leads and devices. On October 1 these were separated and devices were coded as 37.80 through 37.83, and codes for the leads were changed into various 37.70 codes.</i>

CONDITION/PROCEDURE**ICD-9-CM CODES***(D)=Diagnosis code**(P)=Procedure code***Pulmonary Disorders****Pneumonia/Influenza
(PNU)**All of 480, all of 481, 482.2, 482.3,
482.9, 483, 485, 486, 487.0 (all D)**Chronic Obstructive Pulmonary
(COPD)**All of 491, all of 492, all of 494, Disease
all of 496; and 466.0, 518.82, 518.5,
and 786.09 when there is a secondary
diagnosis of any 496 (all D)

Note: *Code 518.8 got a 5th digit on October 1, 1987. Some cases from 799.1 were put into codes 518.81 and 518.82.*

Cerebrovascular Disorders/Procedures**Transient Cerebral Ischemia
(TCI)**433.1, 433.3, 435 (D) and exclude those
patients with an endarterectomy at the
time of admission—38.12(P)**Stroke
(STK)**

431, 434 through 434.9, 436 (all D)

**Carotid Endarterectomy
(ENDART)**38.12 (P) with 433.1 (D); 433.3 (D) or
435(D) as a principal diagnosis**Musculoskeletal Disorders/Procedures****Fracture of Neck of Femur
(FXHIP)**

All of 820 (D)

**Hip Replacement/Revision
(HIPREP)**81.5, 81.6 (exclude 81.69) (all P). On
10/1/89 code 81.51 (P) through 81.53
(P) with same diagnoses.**Open Reduction of Fractured Femur
(OPRDUX)**79.35(P) on condition of 820 (D) as
principal diagnosis

CONDITION/PROCEDURE**ICD-9-CM CODES***(D)=Diagnosis code**(P)=Procedure code***Genitourinary Disorders/Procedures**

Prostatectomy 60.2, 60.3 through 60.69 (all P)
(PROS)

Hysterectomy 68.3 through 68.7 (P)
(HYS)

Gastrointestinal Disorders/Procedures

Cholecystectomy 51.22 (P)
(CHOLOTMY)

Sepsis

Sepsis 003.1, 020.2, 022.3, 036.2, 036.3,
 036.89, 036.9, 038.0, 038.1, 038.2,
 038.3, 038.40, 038.41, 038.42, 038.43,
 038.44, 038.49, 038.8, 038.9, 054.5

Table 2
COMORBIDITY CONDITIONS
 (all are D codes)

COMORBIDITY	ICD-9-CM CODES
Cancer	141-160.9, 162-172.9, 174-208.91
Chronic cardiovascular disease	412-414.9, 426-429.1
Chronic liver disease	571-572.8
Chronic renal disease	582-583.9, 585-587, 403.01, 403.11, 403.91, 404.02, 404.03, 404.12, 404.13, 404.92, 404.93
Chronic diabetes	250.01, 250.1-250.91
Chronic pulmonary disease	491-493.91, 496
Cerebrovascular degeneration	290-290.9, 294-299.9

Table 3

**EXPLANATORY VARIABLES
FOR THE MORTALITY MODEL**

Generally the same variables are used for all diagnostic categories.

Demographics

SXFM An indicator variable: = 1 if Female, 0 otherwise

AGEFM = AGESP if SXFM = 1, 0 otherwise
 AGEML = AGESP if SXFM = 0, 0 otherwise

where

$$\text{AGESP} = \text{sign}(W-65) \left(\frac{|W-65|}{65} \right)^{1.44}$$

and

$$W = \begin{cases} 23 & \text{if } \text{AGE} \leq 23 \\ \text{AGE} & \text{if } 23 < \text{AGE} < 100 \\ 100 & \text{if } 100 \leq \text{AGE} \end{cases}$$

Comorbidities

ICD-9-CM Codes

(Indicator variables = 1 if comorbidity present on current or prior admission with discharge within 6 months prior to current admission, 0 otherwise)

CCA	Cancer	141-160.9, 162-172.9, 174-208.91
CCV	Chronic cardiovascular disease	412-414.9, 426-429.1
CLV	Chronic liver disease	571-572.8
CRN	Chronic renal disease	582-583.9, 585-587, 403.01, 403.11, 403.91, 404.02, 404.03, 404.12, 404.13, 404.92, 404.93
CDI	Chronic diabetes	250.01, 250.1-250.91
COP	Chronic pulmonary disease	491-493.91, 496
CCE	Cerebrovascular degeneration	290-290.9, 294-299.9

Co Occurrence of Comorbidities

COP_CCV	1 if COP = 1 and CCV = 1, 0 otherwise
CCA_CCV	1 if CCA = 1 and CCV = 1, 0 otherwise
COP_CCA	1 if COP = 1 and CCA = 1, 0 otherwise
CCE_CCV	1 if CCE = 1 and CCV = 1, 0 otherwise
CRN_CCV	1 if CRN = 1 and CCV = 1, 0 otherwise

Admission Sources and Types

(Indicator variables = 1 if source or type present, 0 otherwise)

PREF	Patient referred by personal or HMO physician
TRSNF	Patient transferred from skilled nursing facility
ELCT	Patient admitted for elective procedure
EMRG	Patient admitted for emergency

Co-Occurrence of Admission Source and Type

PREF_ELEC = 1 if PREF = 1 and ELCT = 1, 0 otherwise

Previous Hospitalizations

P_RISK1	Number at 1st risk level with 3 or more set to 3
P_RISK2	Number at 2nd risk level with 3 or more set to 3
P_RISK3	Number at 3rd risk level with 3 or more set to 3
P_RISK4	Number at 4th risk level with 4 or more set to 4
P_RISK5	Number at 5th risk level with 3 or more set to 3
F(T)	Probability of death from previous admission if discharge within 182 days of current admission, 0 otherwise

Time Trend

FLAG89	1 if discharge in FY1989, 0 otherwise
FLAG90	1 if discharge in FY1990, 0 otherwise
INYEAR	Difference between current admission date and April 1 of fiscal year of discharge

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1990

CONDITIONS/PROCEDURES	NUMBER OF HOSPITALS	30 DAYS			90 DAYS			180 DAYS			
		2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%	97.5%
OVERALL(< 750 CASES)	2645	0.45	0.88	1.04	1.23	1.72	0.56	0.90	1.03	1.17	1.54
OVERALL(≥ 750 CASES)	2684	0.73	0.91	0.99	1.09	1.35	0.79	0.94	1.01	1.09	1.28
CONDITIONS											
AMI	1405	0.54	0.80	0.95	1.11	1.42	0.62	0.86	0.99	1.14	1.44
CHF	2335	0.43	0.79	0.98	1.17	1.64	0.60	0.85	0.99	1.13	1.49
PNEUMONIA/INFLUENZA	2428	0.41	0.78	0.97	1.18	1.68	0.53	0.84	1.00	1.17	1.55
COPD	435	0.00	0.63	0.97	1.34	2.06	0.30	0.78	1.02	1.26	1.74
TRANS. CEREBRAL ISCHEMIA	404	0.00	0.00	0.83	1.34	3.20	0.00	0.48	0.85	1.31	2.27
STROKE	1789	0.53	0.79	0.95	1.13	1.56	0.61	0.84	0.98	1.13	1.47
HIP FRACTURE	1199	0.21	0.67	0.93	1.27	2.10	0.40	0.76	0.94	1.19	1.80
SEPSIS	254	0.51	0.79	0.96	1.12	1.50	0.65	0.86	0.99	1.13	1.47
PROCEDURES											
ANGIOPLASTY	425	0.00	0.49	0.89	1.33	2.66	0.00	0.60	0.93	1.36	2.34
CABG	556	0.20	0.68	1.03	1.39	2.45	0.28	0.73	1.00	1.32	2.09
PACEMAKER	112	0.00	0.41	0.72	1.37	3.25	0.20	0.61	0.90	1.21	2.17
CAROTID ENDARTERECTOMY	73	0.00	0.00	0.85	1.33	2.90	0.00	0.14	0.74	1.28	2.43
HIP REPLACEMENT	763	0.00	0.53	0.94	1.44	2.77	0.19	0.67	0.96	1.31	2.12
REDUCT. OF HIP FRACTURE	276	0.00	0.56	0.86	1.22	2.05	0.31	0.68	0.92	1.19	1.76
PROSTATECTOMY	1576	0.00	0.00	0.73	1.57	3.56	0.00	0.49	0.91	1.40	2.63
CHOLECYSTECTOMY	714	0.00	0.49	0.95	1.54	2.68	0.00	0.62	0.93	1.37	2.22
HYSTERECTOMY	113	0.00	0.00	0.00	2.00	6.69	0.00	0.00	0.76	1.70	3.59

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1989

CONDITIONS/PROCEDURES	NUMBER OF HOSPITALS	30 DAYS			90 DAYS			180 DAYS		
		2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%
OVERALL(< 750 CASES)	2746	0.50	0.87	1.04	1.23	1.73	0.58	0.89	1.03	1.17
OVERALL(>= 750 CASES)	2669	0.71	0.90	1.00	1.09	1.35	0.79	0.94	1.01	1.08
CONDITIONS										
AMI	1412	0.53	0.81	0.96	1.12	1.47	0.59	0.86	1.01	1.15
CHF	2293	0.47	0.80	0.97	1.18	1.69	0.58	0.86	1.00	1.14
PNEUMONIA/INFLUENZA	2179	0.45	0.77	0.97	1.19	1.67	0.54	0.85	1.01	1.18
COPD	324	0.21	0.68	0.99	1.32	2.13	0.44	0.78	1.04	1.27
TRANS. CEREBRAL ISCHEMIA	420	0.00	0.00	0.79	1.41	3.26	0.00	0.46	0.88	1.33
STROKE	1728	0.53	0.80	0.95	1.12	1.56	0.62	0.85	0.97	1.11
HIP FRACTURE	1126	0.24	0.67	0.95	1.30	2.04	0.39	0.75	0.98	1.21
SEPSIS	174	0.52	0.79	0.94	1.10	1.52	0.63	0.88	1.02	1.15
PROCEDURES										
ANGIOPLASTY	370	0.00	0.46	0.84	1.35	2.55	0.00	0.55	0.88	1.33
CABG	501	0.21	0.65	1.00	1.47	2.57	0.23	0.69	1.00	1.33
PACEMAKER	91	0.00	0.52	0.74	1.12	2.31	0.00	0.56	0.83	1.15
CAROTID ENDARTERECTOMY	55	0.00	0.00	0.82	1.51	5.01	0.00	0.47	0.86	1.31
HIP REPLACEMENT	686	0.00	0.52	0.92	1.44	2.46	0.00	0.65	0.94	1.27
REDUCT. OF HIP FRACTURE	246	0.19	0.57	0.91	1.23	1.96	0.31	0.71	0.96	1.19
PROSTATECTOMY	1570	0.00	0.00	0.67	1.50	3.46	0.00	0.47	0.86	1.36
CHOLECYSTECTOMY	680	0.00	0.53	0.94	1.53	2.90	0.00	0.62	0.97	1.36
HYSTERECTOMY	101	0.00	0.00	0.00	1.80	5.44	0.00	0.00	0.78	1.60

TABLE 4
SMR DISTRIBUTION FOR HOSPITALS WITH GREATER THAN 50 CASES
1990 STUDY, FY1988

CONDITIONS/PROCEDURES	NUMBER OF HOSPITALS	30 DAYS			90 DAYS			180 DAYS		
		2.5%	25%	50%	75%	97.5%	2.5%	25%	50%	75%
OVERALL (< 750 CASES)	2838	0.46	0.89	1.05	1.23	1.75	0.54	0.90	1.03	1.16
OVERALL (>= 750 CASES)	2693	0.73	0.90	1.00	1.10	1.35	0.79	0.94	1.01	1.09
CONDITIONS										
AMI	1414	0.56	0.82	0.96	1.12	1.41	0.63	0.87	1.01	1.14
CHF	2246	0.45	0.79	0.97	1.18	1.61	0.60	0.86	1.00	1.14
PNEUMONIA/INFLUENZA	2069	0.44	0.79	0.97	1.17	1.68	0.57	0.85	1.01	1.17
COPD	310	0.21	0.67	0.92	1.30	2.17	0.39	0.79	0.98	1.20
TRANS. CEREBRAL ISCHEMIA	495	0.00	0.00	0.84	1.48	2.94	0.00	0.48	0.92	1.39
STROKE	1726	0.51	0.79	0.95	1.12	1.56	0.60	0.84	0.98	1.13
HIP FRACTURE	1119	0.24	0.65	0.96	1.27	2.07	0.40	0.78	0.98	1.21
SEPSIS	133	0.58	0.77	0.92	1.08	1.64	0.56	0.86	1.00	1.13
PROCEDURES										
ANGIOPLASTY	297	0.00	0.50	0.87	1.35	2.60	0.00	0.59	0.91	1.34
CABG	478	0.21	0.68	0.98	1.39	2.40	0.32	0.73	1.00	1.36
PACEMAKER	83	0.00	0.34	0.65	1.04	1.75	0.01	0.54	0.85	1.03
CAROTID ENDARTERECTOMY	69	0.00	0.00	0.60	1.23	3.30	0.00	0.33	0.62	1.09
HIP REPLACEMENT	670	0.00	0.49	0.95	1.40	2.65	0.00	0.66	1.01	1.31
REDUCT. OF HIP FRACTURE	259	0.00	0.61	0.91	1.26	2.16	0.38	0.74	0.96	1.21
PROSTATECTOMY	1619	0.00	0.00	0.78	1.53	3.69	0.00	0.54	0.92	1.39
CHOLECYSTECTOMY	642	0.00	0.50	0.96	1.44	3.04	0.00	0.61	0.96	1.36
HYSTERECTOMY	90	0.00	0.00	0.00	1.57	5.00	0.00	0.68	1.43	2.83

TABLE 5: MULTIPLICATIVE FACTORS FOR THE CALCULATION OF THE BOUNDS FOR PREDICTION INTERVALS
 (n is the number of cases at your hospital and p is the predicted mortality rate)

p	n	99% Prediction Interval					95% Prediction Interval					75% Prediction Interval				
		Factor for Upper Bound					Factor for Upper Bound					Factor for Upper Bound				
		1%	5%	10%	20%	40%	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%
25	2.95	2.73	2.68	2.63	2.59	2.15	2.04	2.01	1.99	1.97	1.17	1.16	1.16	1.15	1.15	1.15
50	2.76	2.65	2.63	2.60	2.58	2.05	2.00	1.99	1.97	1.96	1.16	1.15	1.15	1.15	1.15	1.15
75	2.70	2.63	2.61	2.59	2.58	2.02	1.99	1.98	1.97	1.96	1.16	1.15	1.15	1.15	1.15	1.15
100	2.67	2.61	2.60	2.59	2.58	2.01	1.98	1.97	1.97	1.96	1.16	1.15	1.15	1.15	1.15	1.15
150	2.64	2.60	2.59	2.59	2.58	1.99	1.97	1.97	1.96	1.96	1.15	1.15	1.15	1.15	1.15	1.15
200	2.62	2.60	2.59	2.58	2.58	1.98	1.97	1.97	1.96	1.96	1.15	1.15	1.15	1.15	1.15	1.15
300	2.61	2.59	2.58	2.58	2.58	1.98	1.97	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15	1.15
400	2.60	2.59	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15	1.15
500	2.59	2.58	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15	1.15
750	2.59	2.58	2.58	2.58	2.58	1.97	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15	1.15
1000	2.59	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15	1.15
2000	2.58	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15	1.15
5000	2.58	2.58	2.58	2.58	2.58	1.96	1.96	1.96	1.96	1.96	1.15	1.15	1.15	1.15	1.15	1.15
Factor for Lower Bound																
p	n	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%	1%	5%	10%	20%	40%
25	-2.21	-2.42	-2.48	-2.52	-2.56	-1.77	-1.88	-1.91	-1.93	-1.95	-1.13	-1.14	-1.14	-1.15	-1.15	-1.15
50	-2.39	-2.50	-2.53	-2.55	-2.57	-1.87	-1.92	-1.93	-1.95	-1.96	-1.14	-1.15	-1.15	-1.15	-1.15	-1.15
75	-2.45	-2.52	-2.54	-2.56	-2.57	-1.90	-1.93	-1.94	-1.95	-1.96	-1.14	-1.15	-1.15	-1.15	-1.15	-1.15
100	-2.48	-2.54	-2.55	-2.56	-2.57	-1.91	-1.94	-1.95	-1.95	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15	-1.15
150	-2.51	-2.55	-2.56	-2.57	-2.57	-1.93	-1.95	-1.95	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15	-1.15
200	-2.53	-2.56	-2.56	-2.57	-2.57	-1.94	-1.95	-1.95	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15	-1.15
300	-2.54	-2.56	-2.57	-2.57	-2.57	-1.94	-1.95	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15	-1.15
400	-2.55	-2.57	-2.57	-2.57	-2.57	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15	-1.15
500	-2.56	-2.57	-2.57	-2.57	-2.58	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15	-1.15
750	-2.56	-2.57	-2.57	-2.57	-2.58	-1.95	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15	-1.15
1000	-2.57	-2.57	-2.57	-2.57	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15	-1.15
2000	-2.57	-2.57	-2.57	-2.58	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15	-1.15
5000	-2.57	-2.58	-2.58	-2.58	-2.58	-1.96	-1.96	-1.96	-1.96	-1.96	-1.15	-1.15	-1.15	-1.15	-1.15	-1.15

Medicare Hospital Information

ARROWHEAD COMMUNITY HOSPITAL/MED CENTER

18701 NORTH 67TH AVE
GLENDALE, AZ 85312
Medicare Provider Number: 030094

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	335	7.8	6.8	2.1	10.4	10.6	1.9	14.6	13.4	2.2
CONDITIONS:										
Acute Myocardial Infarction.....	5	20.0	18.8	-----	20.0	21.0	-----	20.0	23.1	-----
Congestive Heart Failure.....	11	36.4	14.2	-----	36.4	22.3	-----	45.5	28.6	-----
Pneumonia/Influenza.....	14	14.3	14.7	-----	14.3	20.8	-----	21.4	23.9	-----
Chronic Obstructive Pulmonary Disease.....	6	16.7	7.5	-----	16.7	14.4	-----	16.7	19.8	-----
Transient Cerebral Ischemia.....	3	0.0	0.8	-----	0.0	2.1	-----	0.0	3.7	-----
Stroke.....	11	9.1	14.8	-----	18.2	20.7	-----	27.3	25.0	-----
Hip Fracture.....	10	0.0	4.0	-----	10.0	7.3	-----	10.0	9.7	-----
Sepsis.....	1	100.0	19.8	-----	100.0	25.3	-----	100.0	30.6	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	1	0.0	2.1	-----	0.0	3.6	-----	0.0	5.2	-----
Hip Replacement/Reconstruction.....	8	0.0	2.5	-----	12.5	5.1	-----	12.5	6.9	-----
Open Reduction of Hip Fracture.....	3	0.0	5.5	-----	0.0	9.4	-----	0.0	12.5	-----
Prostatectomy.....	10	0.0	0.6	-----	0.0	1.4	-----	0.0	2.5	-----
Cholecystectomy.....	10	10.0	1.7	-----	10.0	3.1	-----	10.0	4.3	-----
Hysterectomy.....	5	0.0	1.4	-----	0.0	3.2	-----	0.0	4.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

ARROWHEAD COMMUNITY HOSPITAL/MED CENTER
Medicare Provider Number: 030094

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 73.6 years

Proportion female..... 55.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 55.2 %

Transferred from skilled nursing facility..... 0.0 %

Admitted for elective procedure..... 29.0 %

Admitted for emergency..... 38.8 %

COMORBIDITIES:

Cancer..... 6.0 %

Chronic cardiovascular disease..... 23.0 %

Chronic liver disease..... 1.5 %

Chronic renal disease..... 1.8 %

Chronic pulmonary disease..... 17.6 %

Cerebrovascular degeneration..... 5.7 %

Diabetes mellitus..... 6.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 85.7%

State 3.8%

Outside State 10.5%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 5.9 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 87

Occupancy Rate 19.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 31.7 %

Case Mix Index (CMI) 1.3103

STAFFING:

Total Number of Physicians..... 79

Percent of Physicians Board Certified Specialists 48.1 %

Medical Residents/Interns 0

Registered Nurses..... 60

Licensed Practical Nurses 2

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric No

Hospice Care No

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

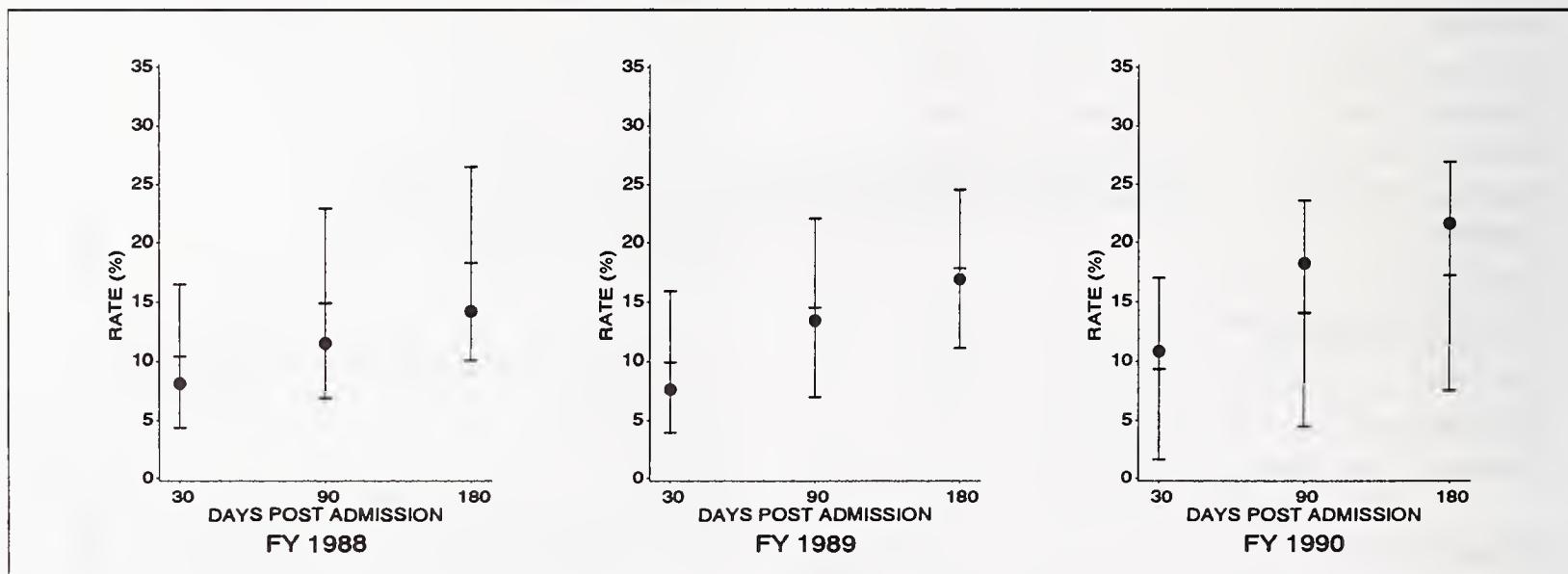
BENSON HOSPITAL
 450 SOUTH OCOTILLO
 BENSON, AZ 85602
 Medicare Provider Number: 030054

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	176	10.8	9.3	3.8	18.2	14.0	4.8	21.6	17.2	4.9
CONDITIONS:										
Acute Myocardial Infarction.....	4	0.0	10.8	-----	0.0	13.5	-----	0.0	15.8	-----
Congestive Heart Failure.....	17	17.6	14.7	-----	29.4	24.2	-----	41.2	30.1	-----
Pneumonia/Influenza.....	20	10.0	14.9	-----	15.0	19.7	-----	20.0	22.8	-----
Chronic Obstructive Pulmonary Disease.....	12	8.3	6.4	-----	8.3	11.2	-----	8.3	14.6	-----
Transient Cerebral Ischemia.....	3	0.0	1.0	-----	0.0	2.5	-----	0.0	4.2	-----
Stroke.....	10	30.0	18.8	-----	40.0	24.5	-----	40.0	28.2	-----
Hip Fracture.....	0									
Sepsis.....	1	0.0	5.5	-----	0.0	7.4	-----	0.0	9.0	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	0									
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



BENSON HOSPITAL
Medicare Provider Number: 030054

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 75.3 years

Proportion female..... 46.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 25.0 %

Transferred from skilled nursing facility..... 0.0 %

Admitted for elective procedure..... 0.0 %

Admitted for emergency..... 72.7 %

COMORBIDITIES:

Cancer..... 3.4 %

Chronic cardiovascular disease..... 38.6 %

Chronic liver disease..... 0.6 %

Chronic renal disease..... 4.5 %

Chronic pulmonary disease..... 23.3 %

Cerebrovascular degeneration..... 0.6 %

Diabetes mellitus..... 2.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 84.2%

State 4.7%

Outside State 11.1%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 4.3 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1989

PROFILE:

Total Beds 22

Ownership/Control..... Private, Non-Profit

Case Mix Index (CMI) 0.8988

STAFFING:

Medical Residents/Interns 0

Registered Nurses..... 7

Licensed Practical Nurses 2

SPECIALTY SERVICES:

Burn Unit No

Coronary Care Unit No

Hospice Care No

Intensive Care Unit No

Organ Transplant No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation Yes

Psychiatric No

Medicare Swing Beds Yes

** Except for CMI

* Not used in calculating mortality rates

BULLHEAD COMMUNITY HOSPITAL

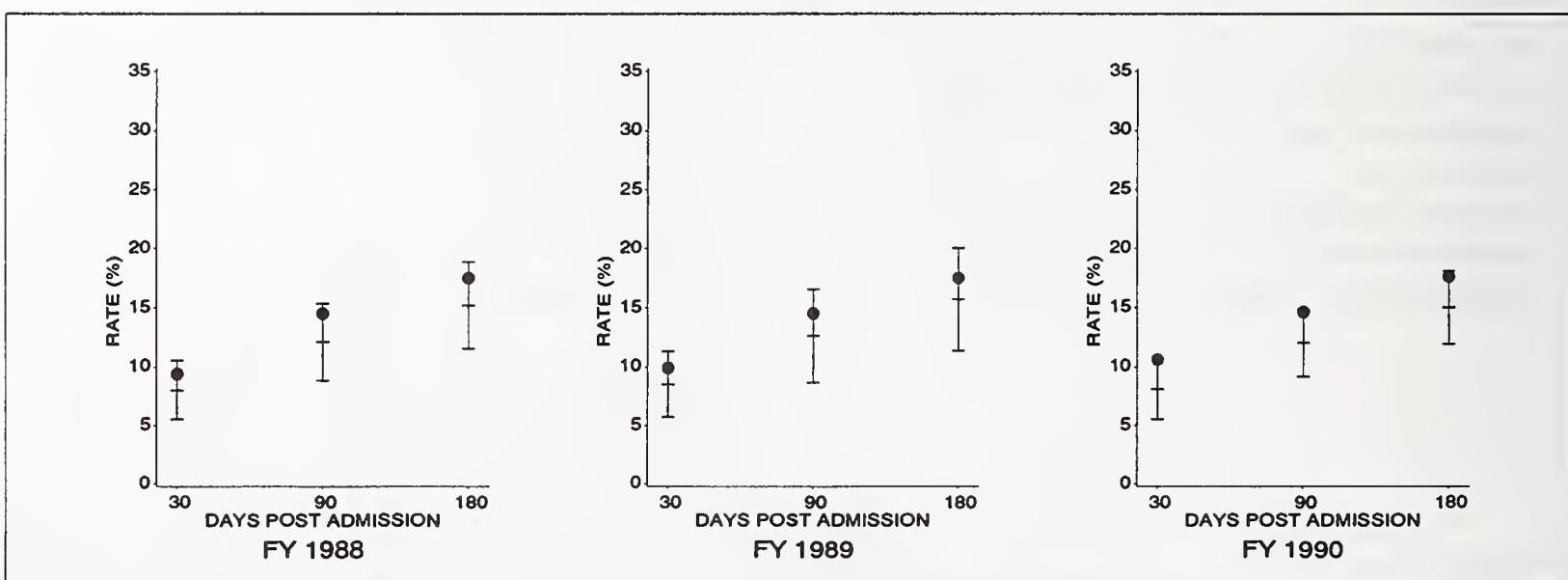
2735 SILVER CREEK ROAD
 BULLHEAD CITY, AZ 86430
 Medicare Provider Number: 030086

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	756	10.6	8.1	1.3	14.6	12.0	1.4	17.6	15.0	1.5
CONDITIONS:										
Acute Myocardial Infarction.....	41	24.4	20.7	-----	29.3	23.3	-----	29.3	25.9	-----
Congestive Heart Failure.....	55	18.2	12.1	6.5	23.6	19.5	7.1	34.5	25.2	9.8
Pneumonia/Influenza.....	56	17.9	12.1	7.5	23.2	16.9	7.6	25.0	20.2	8.7
Chronic Obstructive Pulmonary Disease.....	24	4.2	5.4	-----	4.2	9.5	-----	16.7	13.1	-----
Transient Cerebral Ischemia.....	5	0.0	1.3	-----	0.0	3.1	-----	0.0	5.1	-----
Stroke.....	25	28.0	17.2	-----	28.0	23.0	-----	28.0	26.4	-----
Hip Fracture.....	24	4.2	6.2	-----	8.3	11.1	-----	8.3	14.3	-----
Sepsis.....	6	16.7	22.2	-----	16.7	29.7	-----	16.7	34.1	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	10	0.0	2.7	-----	0.0	4.8	-----	0.0	6.6	-----
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	18	5.6	4.0	-----	5.6	7.1	-----	5.6	9.2	-----
Open Reduction of Hip Fracture.....	14	7.1	6.7	-----	14.3	12.4	-----	14.3	16.3	-----
Prostatectomy.....	59	0.0	1.0	1.9	1.7	2.2	2.6	5.1	3.8	3.3
Cholecystectomy.....	16	0.0	1.8	-----	6.3	3.1	-----	6.3	4.1	-----
Hysterectomy.....	9	0.0	0.3	-----	0.0	0.8	-----	0.0	1.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



BULLHEAD COMMUNITY HOSPITAL
Medicare Provider Number: 030086

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 72.8 years

Proportion female..... 45.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 47.0 %

Transferred from skilled nursing facility..... 0.1 %

Admitted for elective procedure..... 4.1 %

Admitted for emergency..... 51.7 %

COMORBIDITIES:

Cancer..... 7.4 %

Chronic cardiovascular disease..... 35.3 %

Chronic liver disease..... 1.2 %

Chronic renal disease..... 0.1 %

Chronic pulmonary disease..... 23.3 %

Cerebrovascular degeneration..... 0.9 %

Diabetes mellitus..... 11.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 67.8%

State 4.3%

Outside State 27.9%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 5.3 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 48

Occupancy Rate 56.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 50.5 %

Case Mix Index (CMI) 1.2678

STAFFING:

Total Number of Physicians..... (Not Available)

Percent of Physicians Board Certified Specialists (Not Available)

Medical Residents/Interns (Not Available)

Registered Nurses..... (Not Available)

Licensed Practical Nurses (Not Available)

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric No

Hospice Care No

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

CASA GRANDE REGIONAL MEDICAL CENTER

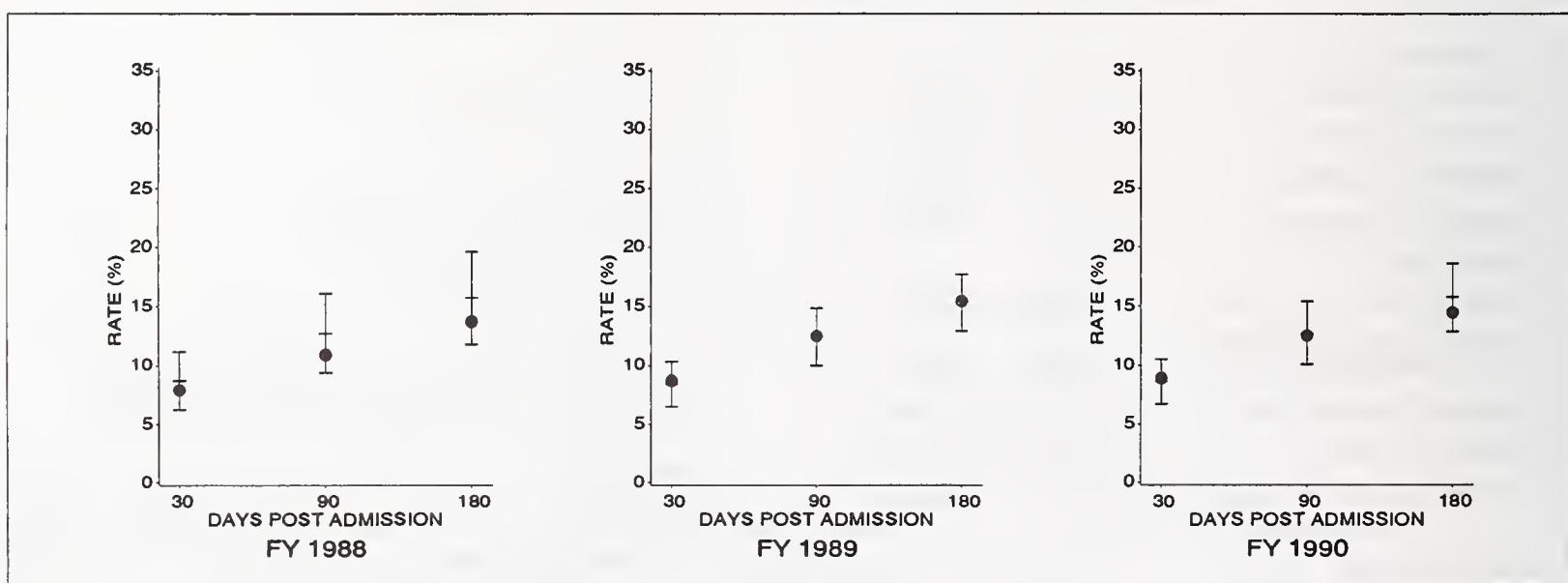
1800 EAST FLORENCE BOULEVARD
CASA GRANDE, AZ 85222
Medicare Provider Number: 030016

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	945	8.9	8.6	1.0	12.5	12.7	1.3	14.4	15.7	1.4
CONDITIONS:										
Acute Myocardial Infarction.....	24	29.2	28.5	-----	33.3	31.1	-----	37.5	33.5	-----
Congestive Heart Failure.....	52	11.5	14.9	7.1	26.9	23.5	6.5	30.8	29.5	6.4
Pneumonia/Influenza.....	47	6.4	14.4	-----	10.6	20.0	-----	12.8	23.6	-----
Chronic Obstructive Pulmonary Disease.....	35	2.9	6.6	-----	5.7	11.6	-----	5.7	15.5	-----
Transient Cerebral Ischemia.....	24	4.2	1.5	-----	8.3	3.4	-----	8.3	5.4	-----
Stroke.....	25	16.0	18.9	-----	24.0	24.5	-----	28.0	27.8	-----
Hip Fracture.....	22	18.2	6.1	-----	18.2	11.0	-----	22.7	14.1	-----
Sepsis.....	4	25.0	21.1	-----	25.0	26.7	-----	25.0	30.7	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	7	0.0	1.4	-----	0.0	2.9	-----	0.0	4.5	-----
Carotid Endarterectomy.....	5	0.0	0.9	-----	0.0	1.8	-----	0.0	2.7	-----
Hip Replacement/Reconstruction.....	19	10.5	2.6	-----	10.5	5.1	-----	15.8	6.8	-----
Open Reduction of Hip Fracture.....	9	11.1	5.6	-----	11.1	10.3	-----	11.1	13.5	-----
Prostatectomy.....	21	4.8	0.6	-----	4.8	1.3	-----	4.8	2.2	-----
Cholecystectomy.....	27	0.0	3.6	-----	0.0	5.6	-----	0.0	6.7	-----
Hysterectomy.....	6	0.0	0.3	-----	0.0	0.7	-----	0.0	1.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CASA GRANDE REGIONAL MEDICAL CENTER
Medicare Provider Number: 030016

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 73.2 years

Proportion female..... 51.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 47.7 %

Transferred from skilled nursing facility..... 0.0 %

Admitted for elective procedure..... 0.5 %

Admitted for emergency..... 55.2 %

COMORBIDITIES:

Cancer..... 4.8 %

Chronic cardiovascular disease..... 30.1 %

Chronic liver disease..... 1.3 %

Chronic renal disease..... 1.8 %

Chronic pulmonary disease..... 17.5 %

Cerebrovascular degeneration..... 4.5 %

Diabetes mellitus..... 8.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 80.1%

State 5.2%

Outside State 14.7%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 6.0 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 221

Occupancy Rate 70.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 37.0 %

Case Mix Index (CMI) 1.1746

STAFFING:

Total Number of Physicians..... 29

Percent of Physicians Board Certified Specialists..... 69.0 %

Medical Residents/Interns 0

Registered Nurses..... 70

Licensed Practical Nurses 6

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric No

Hospice Care No

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds Yes

** Except for CMI

* Not used in calculating mortality rates

CENTRAL ARIZONA MEDICAL CENTER

450 ADAMSVILLE ROAD, BOX 789

FLORENCE, AZ 85232

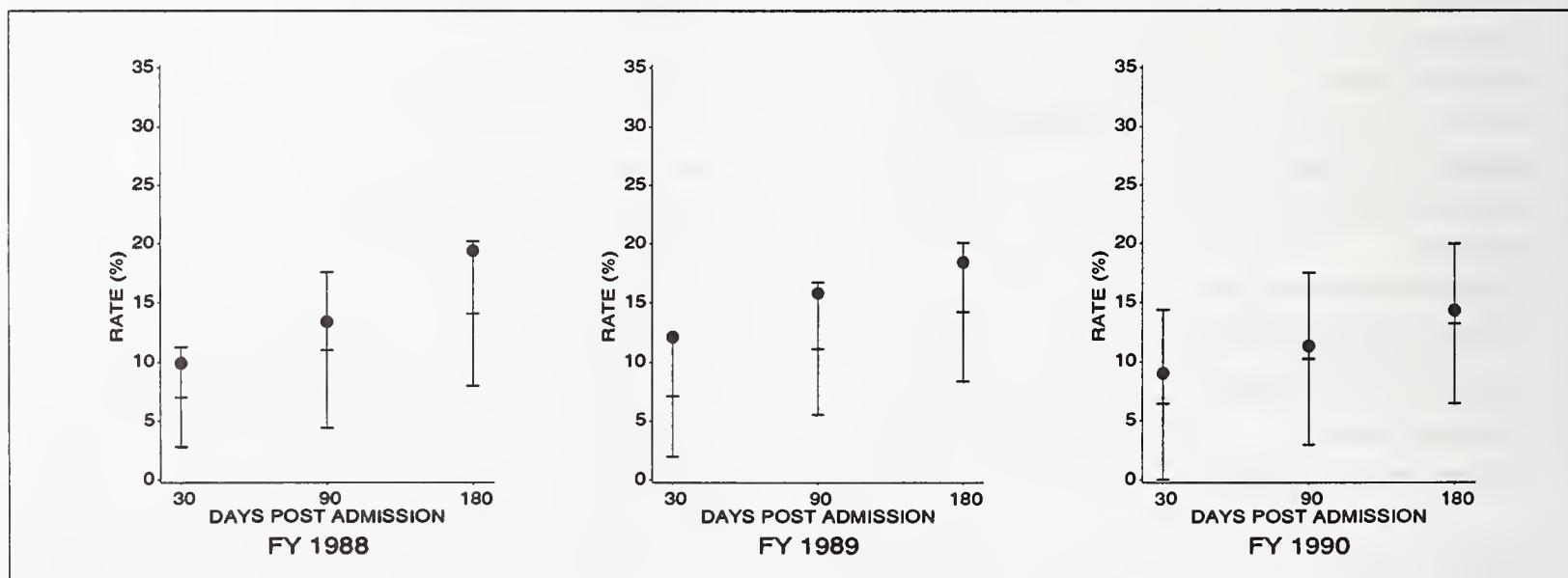
Medicare Provider Number: 030049

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	133	9.0	6.4	4.0	11.3	10.2	3.6	14.3	13.2	3.4
CONDITIONS:										
Acute Myocardial Infarction.....	1	0.0	26.2	-----	0.0	29.2	-----	0.0	33.0	-----
Congestive Heart Failure.....	11	63.6	15.4	-----	63.6	24.3	-----	72.7	30.8	-----
Pneumonia/Influenza.....	13	15.4	7.9	-----	15.4	11.2	-----	15.4	14.0	-----
Chronic Obstructive Pulmonary Disease.....	6	0.0	3.4	-----	0.0	6.5	-----	0.0	9.1	-----
Transient Cerebral Ischemia.....	3	0.0	1.2	-----	0.0	2.6	-----	0.0	4.2	-----
Stroke.....	2	50.0	20.9	-----	50.0	26.5	-----	50.0	30.0	-----
Hip Fracture.....	1	0.0	3.4	-----	0.0	6.5	-----	0.0	8.4	-----
Sepsis.....	0									
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	1	0.0	2.6	-----	0.0	5.2	-----	0.0	7.1	-----
Prostatectomy.....	0									
Cholecystectomy.....	1	0.0	0.3	-----	0.0	0.6	-----	0.0	0.8	-----
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



CENTRAL ARIZONA MEDICAL CENTER
Medicare Provider Number: 030049

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 73.4 years

Proportion female..... 56.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 97.7 %

Transferred from skilled nursing facility..... 0.0 %

Admitted for elective procedure..... 2.3 %

Admitted for emergency..... 60.9 %

COMORBIDITIES:

Cancer..... 3.8 %

Chronic cardiovascular disease..... 27.8 %

Chronic liver disease..... 2.3 %

Chronic renal disease..... 3.8 %

Chronic pulmonary disease..... 19.5 %

Cerebrovascular degeneration..... 3.0 %

Diabetes mellitus..... 7.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 83.6%

State 6.1%

Outside State 10.3%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 4.0 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1986

PROFILE:

Total Beds 91

Ownership/Control..... Local Government

Case Mix Index (CMI) 0.9426

STAFFING:

Medical Residents/Interns 0

Registered Nurses..... 35

Licensed Practical Nurses 15

SPECIALTY SERVICES:

Burn Unit No

Coronary Care Unit No

Hospice Care No

Intensive Care Unit No

Organ Transplant No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation..... No

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

CHANDLER REGIONAL HOSPITAL

475 SOUTH DOBSON ROAD

CHANDLER, AZ 85224

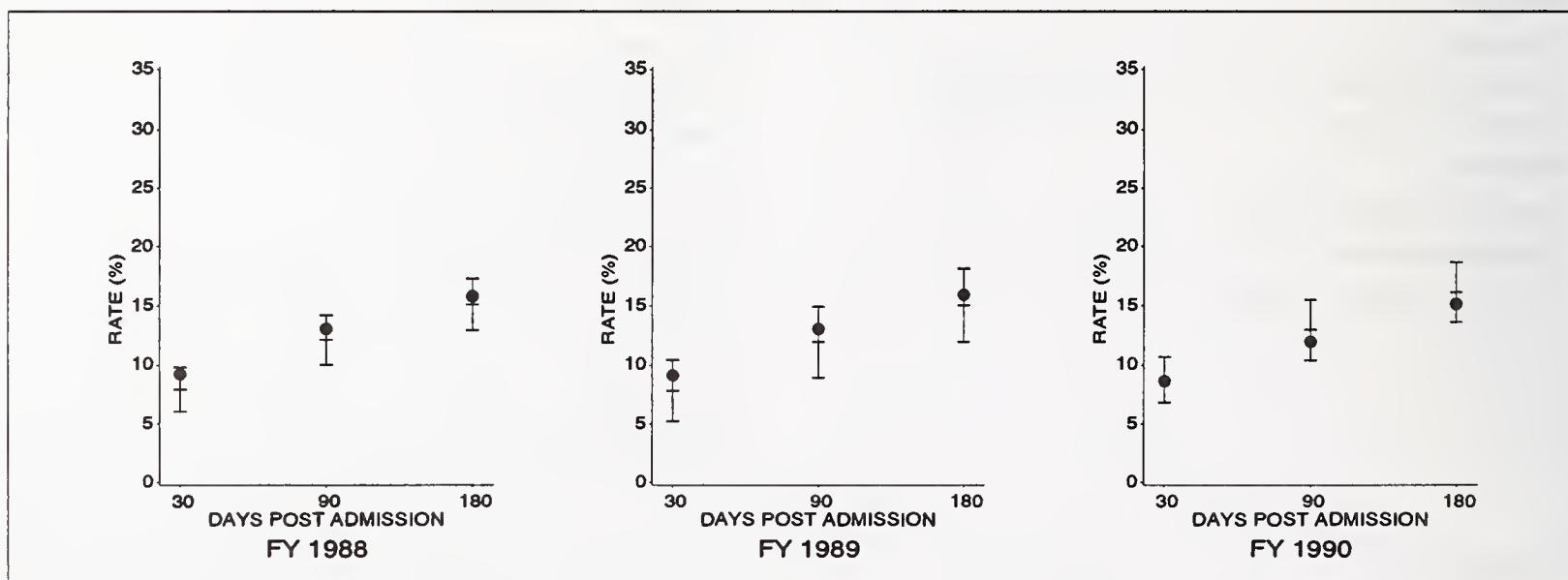
Medicare Provider Number: 030036

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1572	8.6	8.7	1.0	11.9	12.9	1.3	15.1	16.1	1.3
CONDITIONS:										
Acute Myocardial Infarction.....	49	32.7	26.0	-----	38.8	29.0	-----	40.8	31.7	-----
Congestive Heart Failure.....	65	13.8	12.2	4.8	18.5	19.2	6.6	21.5	25.0	8.3
Pneumonia/Influenza.....	74	8.1	12.1	5.0	12.2	17.0	6.2	16.2	20.5	5.7
Chronic Obstructive Pulmonary Disease.....	14	21.4	6.2	-----	28.6	11.2	-----	28.6	15.6	-----
Transient Cerebral Ischemia.....	16	0.0	1.4	-----	6.3	3.3	-----	6.3	5.7	-----
Stroke.....	67	13.4	19.8	8.3	20.9	25.1	7.4	23.9	28.6	8.3
Hip Fracture.....	43	2.3	4.5	-----	9.3	7.9	-----	9.3	10.5	-----
Sepsis.....	26	11.5	19.5	-----	11.5	26.0	-----	11.5	30.3	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	18	5.6	2.8	-----	5.6	5.3	-----	5.6	7.6	-----
Carotid Endarterectomy.....	10	0.0	1.3	-----	0.0	2.3	-----	0.0	3.3	-----
Hip Replacement/Reconstruction.....	22	0.0	3.1	-----	9.1	5.5	-----	9.1	7.3	-----
Open Reduction of Hip Fracture.....	25	4.0	4.1	-----	8.0	7.5	-----	8.0	10.1	-----
Prostatectomy.....	89	0.0	0.5	1.1	2.2	1.2	1.4	4.5	2.2	2.2
Cholecystectomy.....	49	0.0	1.7	-----	2.0	3.3	-----	6.1	4.7	-----
Hysterectomy.....	14	7.1	1.4	-----	7.1	3.1	-----	7.1	4.7	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CHANDLER REGIONAL HOSPITAL
Medicare Provider Number: 030036

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 73.4 years

Proportion female..... 50.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 53.2 %

Transferred from skilled nursing facility..... 0.2 %

Admitted for elective procedure..... 8.9 %

Admitted for emergency..... 28.8 %

COMORBIDITIES:

Cancer..... 6.6 %

Chronic cardiovascular disease..... 27.9 %

Chronic liver disease..... 0.8 %

Chronic renal disease..... 4.8 %

Chronic pulmonary disease..... 17.8 %

Cerebrovascular degeneration..... 2.7 %

Diabetes mellitus..... 12.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City..... 75.8%

State 15.7%

Outside State 8.5%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 6.1 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 120

Occupancy Rate 64.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 21.1 %

Case Mix Index (CMI) 1.2900

STAFFING:

Total Number of Physicians..... 96

Percent of Physicians Board Certified Specialists..... 51.0 %

Medical Residents/Interns 0

Registered Nurses..... 189

Licensed Practical Nurses 4

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric No

Hospice Care No

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

CHINLE COMPREHENSIVE CARE FACILITY

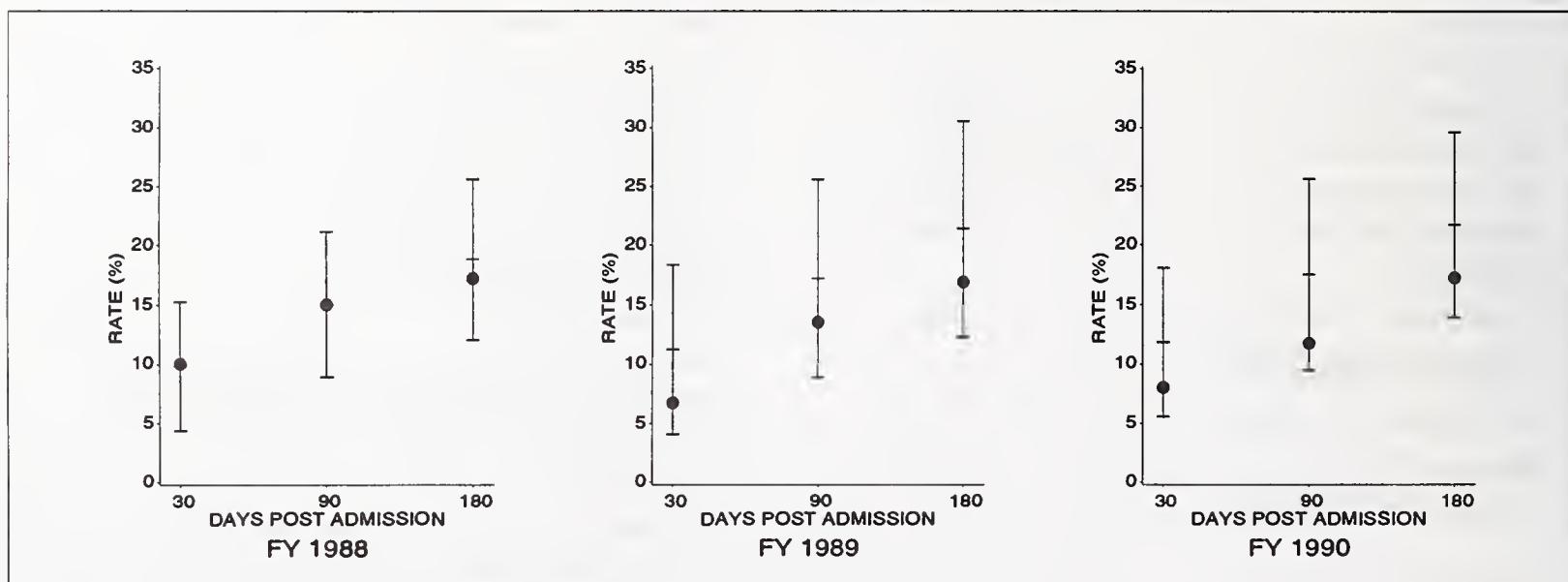
P O BOX PH
CHINLE, AZ 86503
Medicare Provider Number: 030084

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	163	8.0	11.8	3.1	11.7	17.5	4.0	17.2	21.7	3.9
CONDITIONS:										
Acute Myocardial Infarction.....	3	0.0	37.2	----	0.0	39.7	----	33.3	42.7	----
Congestive Heart Failure.....	5	20.0	25.2	----	20.0	42.0	----	20.0	51.9	----
Pneumonia/Influenza.....	19	15.8	18.5	----	15.8	26.1	----	26.3	30.8	----
Chronic Obstructive Pulmonary Disease.....	4	0.0	6.6	----	0.0	13.1	----	0.0	18.9	----
Transient Cerebral Ischemia.....	2	0.0	3.3	----	0.0	7.4	----	0.0	11.7	----
Stroke.....	5	20.0	17.3	----	20.0	22.9	----	20.0	26.5	----
Hip Fracture.....	1	0.0	5.5	----	0.0	10.2	----	0.0	14.8	----
Sepsis.....	3	33.3	26.2	----	33.3	34.0	----	33.3	39.7	----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	8	0.0	1.6	----	0.0	2.7	----	0.0	3.5	----
Hysterectomy.....	3	0.0	0.2	----	0.0	0.5	----	0.0	0.8	----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



CHINLE COMPREHENSIVE CARE FACILITY

Medicare Provider Number: 030084

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	75.8 years
Proportion female.....	50.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	1.2 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	0.0 %
Admitted for emergency.....	0.6 %

COMORBIDITIES:

Cancer.....	4.3 %
Chronic cardiovascular disease.....	16.0 %
Chronic liver disease.....	1.8 %
Chronic renal disease.....	8.0 %
Chronic pulmonary disease.....	5.5 %
Cerebrovascular degeneration.....	5.5 %
Diabetes mellitus.....	11.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	81.0%
State	17.8%
Outside State	1.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.2 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	60
Occupancy Rate	56.0 %
Ownership/Control.....	Federal Government
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.0513

STAFFING:

Total Number of Physicians.....	25
Percent of Physicians Board Certified Specialists.....	96.0 %
Medical Residents/Interns	0
Registered Nurses.....	73
Licensed Practical Nurses	9

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

COMMUNITY GENERAL HOSPITAL

500 EAST IOWA
HOLBROOK, AZ 86025
Medicare Provider Number: 030091

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	37	2.7	5.7	----	2.7	8.8	----	2.7	11.6	----
CONDITIONS:										
Acute Myocardial Infarction.....	0									
Congestive Heart Failure.....	1	0.0	10.8	----	0.0	19.4	----	0.0	24.1	----
Pneumonia/Influenza.....	5	0.0	6.5	----	0.0	9.1	----	0.0	11.1	----
Chronic Obstructive Pulmonary Disease.....	1	0.0	11.3	----	0.0	18.2	----	0.0	22.7	----
Transient Cerebral Ischemia.....	0									
Stroke.....	0									
Hip Fracture.....	0									
Sepsis.....	0									
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	0									
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

COMMUNITY GENERAL HOSPITAL
Medicare Provider Number: 030091

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 75.2 years

Proportion female..... 56.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 45.9 %

Transferred from skilled nursing facility..... 0.0 %

Admitted for elective procedure..... 0.0 %

Admitted for emergency..... 10.8 %

COMORBIDITIES:

Cancer..... 2.7 %

Chronic cardiovascular disease..... 40.5 %

Chronic liver disease..... 2.7 %

Chronic renal disease..... 2.7 %

Chronic pulmonary disease..... 5.4 %

Cerebrovascular degeneration..... 0.0 %

Diabetes mellitus..... 8.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 79.6%

State 7.4%

Outside State 13.0%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 3.2 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 25

Occupancy Rate 8.0 %

Ownership/Control..... Private, For Profit

Medicare Discharges 21.2 %

Case Mix Index (CMI) 0.8823

STAFFING:

Total Number of Physicians..... (Not Available)

Percent of Physicians Board
Certified Specialists(Not Available)

Medical Residents/Interns 0

Registered Nurses..... 7

Licensed Practical Nurses 0

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric Yes

Hospice Care No

Medical/Surgical Intensive Care No

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

COMMUNITY HOSPITAL MEDICAL CENTER

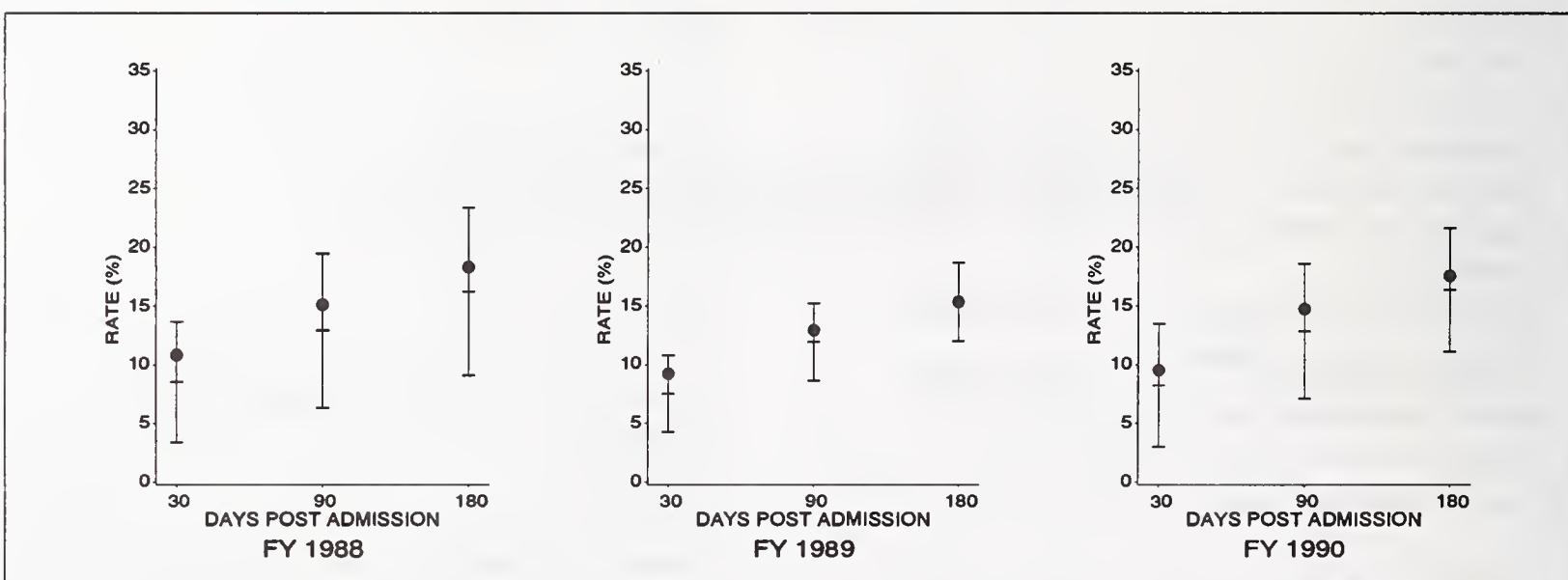
6501 NORTH 19TH AVENUE
PHOENIX, AZ 85015
Medicare Provider Number: 0300059

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	401	9.5	8.2	2.6	14.7	12.8	2.9	17.5	16.3	2.6
CONDITIONS:										
Acute Myocardial Infarction.....	11	36.4	23.2	-----	36.4	26.5	-----	45.5	29.3	-----
Congestive Heart Failure.....	27	11.1	15.9	-----	11.1	25.2	-----	14.8	31.8	-----
Pneumonia/Influenza.....	15	0.0	11.0	-----	6.7	15.8	-----	13.3	19.2	-----
Chronic Obstructive Pulmonary Disease.....	5	0.0	6.8	-----	0.0	12.0	-----	0.0	16.0	-----
Transient Cerebral Ischemia.....	2	0.0	1.2	-----	0.0	3.2	-----	0.0	5.6	-----
Stroke.....	7	14.3	18.6	-----	14.3	22.8	-----	28.6	25.7	-----
Hip Fracture.....	10	0.0	8.1	-----	10.0	14.6	-----	20.0	18.5	-----
Sepsis.....	2	0.0	15.0	-----	0.0	21.1	-----	0.0	24.9	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	5	0.0	2.9	-----	0.0	6.5	-----	0.0	10.6	-----
Carotid Endarterectomy.....	2	0.0	0.6	-----	0.0	1.2	-----	0.0	1.9	-----
Hip Replacement/Reconstruction.....	5	0.0	9.8	-----	0.0	18.4	-----	0.0	23.7	-----
Open Reduction of Hip Fracture.....	4	0.0	4.7	-----	0.0	8.4	-----	25.0	11.1	-----
Prostatectomy.....	27	0.0	1.0	-----	3.7	2.4	-----	3.7	4.2	-----
Cholecystectomy.....	17	11.8	3.5	-----	17.6	6.1	-----	23.5	7.9	-----
Hysterectomy.....	5	20.0	1.7	-----	20.0	3.8	-----	20.0	5.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE ($\pm 2 SD$) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



COMMUNITY HOSPITAL MEDICAL CENTER
Medicare Provider Number: 030059

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	73.9 years
Proportion female.....	53.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	98.8 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	30.9 %
Admitted for emergency.....	40.9 %

COMORBIDITIES:

Cancer.....	10.2 %
Chronic cardiovascular disease.....	36.7 %
Chronic liver disease.....	0.7 %
Chronic renal disease.....	2.7 %
Chronic pulmonary disease.....	25.2 %
Cerebrovascular degeneration.....	2.2 %
Diabetes mellitus.....	8.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	88.9%
State	6.6%
Outside State	4.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.9 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1989

PROFILE:

Total Beds	75
Ownership/Control.....	Private, For Profit
Case Mix Index (CMI)	1.3527

STAFFING:

Medical Residents/Interns	0
Registered Nurses.....	53
Licensed Practical Nurses	5

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

COPPER QUEEN COMMUNITY HOSPITAL

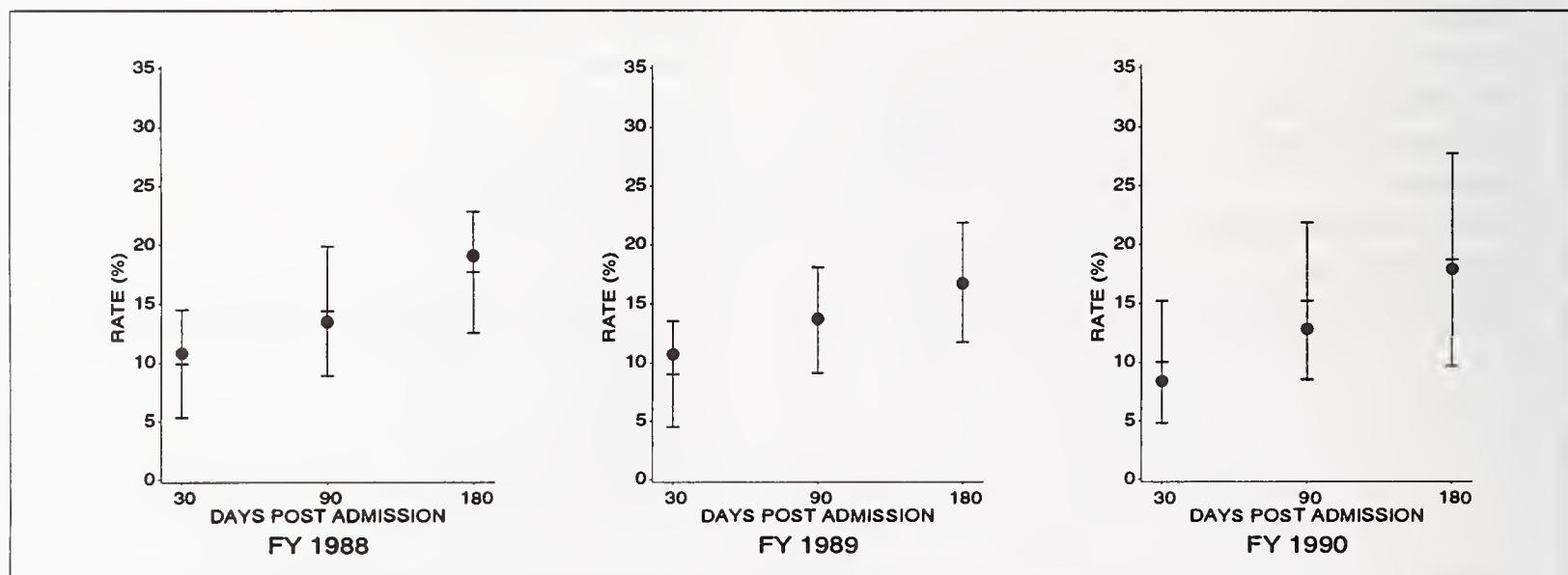
101 COLE AVENUE
BISBEE, AZ 85603
Medicare Provider Number: 030027

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	179	8.4	10.0	2.6	12.8	15.2	3.3	17.9	18.7	4.5
CONDITIONS:										
Acute Myocardial Infarction.....	3	66.7	38.4	-----	66.7	41.0	-----	66.7	43.7	-----
Congestive Heart Failure.....	15	13.3	15.4	-----	26.7	23.7	-----	33.3	30.1	-----
Pneumonia/Influenza.....	15	13.3	9.0	-----	13.3	12.6	-----	20.0	15.3	-----
Chronic Obstructive Pulmonary Disease.....	1	0.0	24.0	-----	0.0	33.9	-----	0.0	42.0	-----
Transient Cerebral Ischemia.....	1	0.0	2.1	-----	0.0	5.7	-----	0.0	10.0	-----
Stroke.....	4	25.0	23.9	-----	25.0	28.2	-----	50.0	31.3	-----
Hip Fracture.....	8	12.5	6.5	-----	12.5	11.2	-----	25.0	14.2	-----
Sepsis.....	4	25.0	18.6	-----	50.0	26.0	-----	50.0	31.1	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	2	0.0	8.9	-----	0.0	13.8	-----	50.0	17.2	-----
Open Reduction of Hip Fracture.....	4	25.0	5.1	-----	25.0	9.7	-----	25.0	12.6	-----
Prostatectomy.....	0									
Cholecystectomy.....	2	0.0	6.5	-----	0.0	14.1	-----	0.0	20.5	-----
Hysterectomy.....	1	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



COPPER QUEEN COMMUNITY HOSPITAL

Medicare Provider Number: 030027

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	74.1 years
Proportion female.....	52.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	45.8 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	3.9 %
Admitted for emergency.....	53.6 %

COMORBIDITIES:

Cancer.....	6.7 %
Chronic cardiovascular disease.....	47.5 %
Chronic liver disease.....	2.8 %
Chronic renal disease.....	1.1 %
Chronic pulmonary disease.....	16.8 %
Cerebrovascular degeneration.....	4.5 %
Diabetes mellitus.....	8.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	94.0%
State	3.0%
Outside State	3.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.4 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	45
Occupancy Rate	57.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	57.4 %
Case Mix Index (CMI)	1.0501

STAFFING:

Total Number of Physicians.....	10
Percent of Physicians Board Certified Specialists.....	60.0 %
Medical Residents/Interns	0
Registered Nurses.....	18
Licensed Practical Nurses	3

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

DEL E WEBB MEMORIAL HOSPITAL

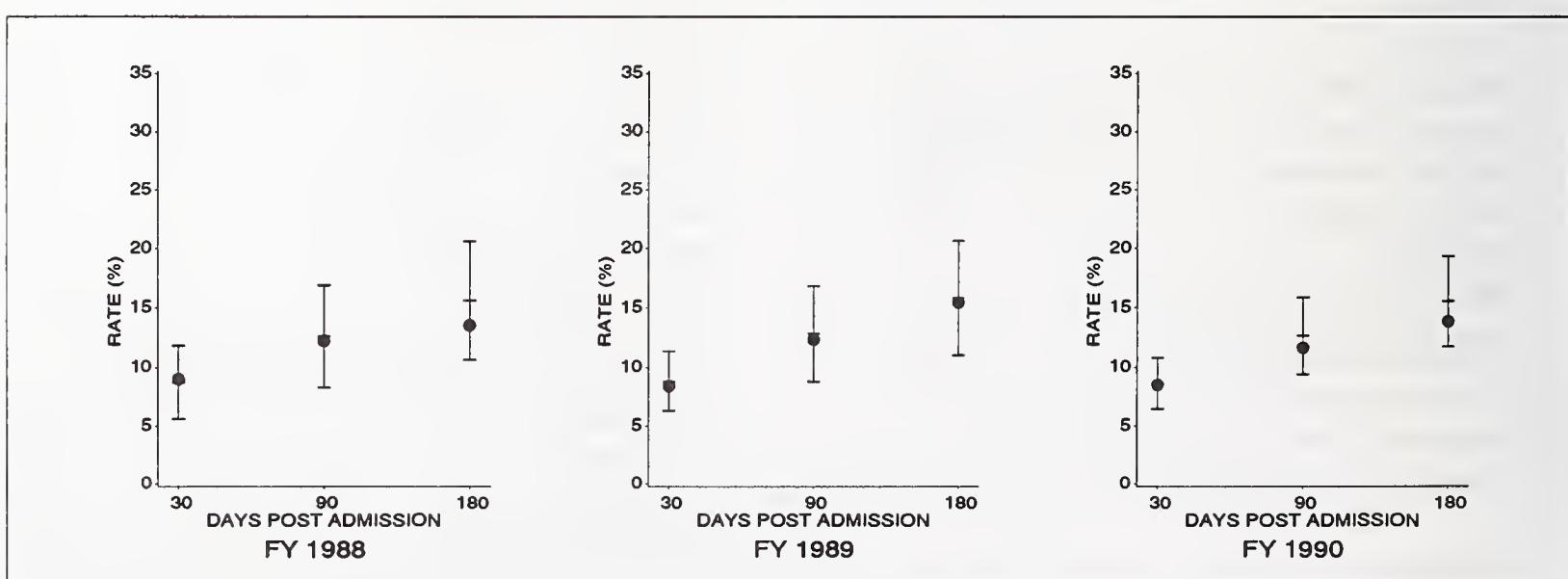
14502 WEST MEEKER BLVD
SUN CITY WEST, AZ 85375
Medicare Provider Number: 030093

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	956	8.5	8.6	1.1	11.6	12.6	1.6	13.8	15.5	1.9
CONDITIONS:										
Acute Myocardial Infarction.....	35	22.9	24.6	-----	28.6	26.8	-----	28.6	29.1	-----
Congestive Heart Failure.....	29	13.8	15.9	-----	17.2	24.9	-----	17.2	31.3	-----
Pneumonia/Influenza.....	34	20.6	12.8	-----	26.5	17.3	-----	26.5	20.6	-----
Chronic Obstructive Pulmonary Disease.....	19	21.1	9.9	-----	31.6	16.8	-----	36.8	22.2	-----
Transient Cerebral Ischemia.....	13	0.0	2.0	-----	0.0	4.2	-----	7.7	6.4	-----
Stroke.....	41	12.2	21.2	-----	19.5	26.9	-----	26.8	30.5	-----
Hip Fracture.....	37	10.8	5.2	-----	13.5	9.2	-----	13.5	12.0	-----
Sepsis.....	13	7.7	27.2	-----	7.7	37.0	-----	30.8	41.6	-----
PROCEDURES:										
Angioplasty.....	1	0.0	5.3	-----	0.0	7.2	-----	0.0	8.3	-----
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	8	0.0	3.4	-----	0.0	5.5	-----	0.0	7.8	-----
Carotid Endarterectomy.....	2	0.0	1.3	-----	0.0	2.5	-----	0.0	3.8	-----
Hip Replacement/Reconstruction.....	30	3.3	2.9	-----	3.3	5.2	-----	3.3	7.0	-----
Open Reduction of Hip Fracture.....	15	13.3	5.0	-----	20.0	9.0	-----	20.0	11.9	-----
Prostatectomy.....	49	0.0	0.7	-----	2.0	1.6	-----	4.1	2.8	-----
Cholecystectomy.....	25	0.0	2.4	-----	4.0	4.7	-----	8.0	6.6	-----
Hysterectomy.....	19	0.0	0.2	-----	0.0	0.5	-----	0.0	0.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



DEL E WEBB MEMORIAL HOSPITAL
Medicare Provider Number: 030093

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 74.5 years
Proportion female..... 47.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 39.3 %
Transferred from skilled nursing facility..... 0.4 %
Admitted for elective procedure..... 20.2 %
Admitted for emergency..... 57.0 %

COMORBIDITIES:

Cancer..... 6.5 %
Chronic cardiovascular disease..... 31.3 %
Chronic liver disease..... 0.8 %
Chronic renal disease..... 1.4 %
Chronic pulmonary disease..... 13.2 %
Cerebrovascular degeneration..... 3.2 %
Diabetes mellitus..... 3.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	86.7%
State	2.6%
Outside State	10.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.9 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	141
Occupancy Rate	48.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	79.4 %
Case Mix Index (CMI)	1.2841

STAFFING:

Total Number of Physicians.....	93
Percent of Physicians Board Certified Specialists	77.4 %
Medical Residents/Interns	0
Registered Nurses.....	87
Licensed Practical Nurses	1

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	Yes
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

DESERT SAMARITAN MEDICAL CENTER

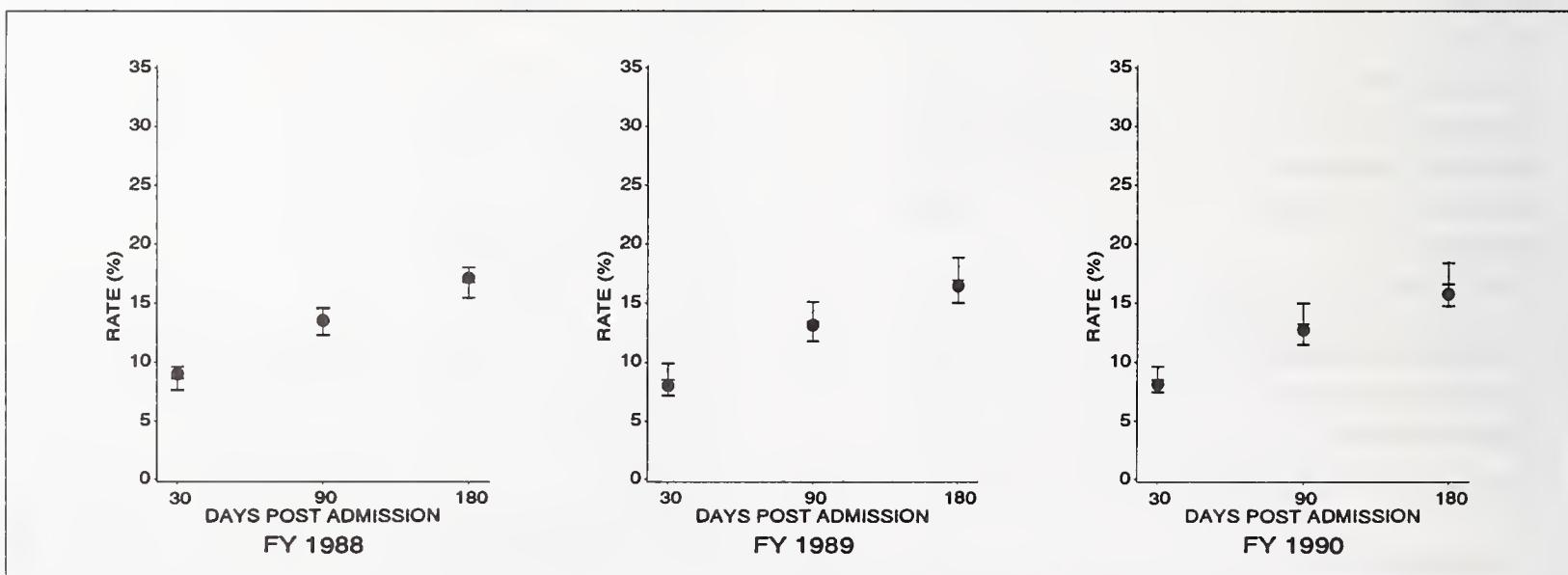
1400 SOUTH DOBSON ROAD
MESA, AZ 85202
Medicare Provider Number: 030065

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	3178	8.1	8.5	0.5	12.7	13.2	0.9	15.7	16.5	0.9
CONDITIONS:										
Acute Myocardial Infarction.....	98	23.5	25.2	4.6	25.5	28.1	5.3	26.5	30.7	6.0
Congestive Heart Failure.....	117	9.4	13.7	4.8	23.1	22.1	4.7	25.6	28.3	4.8
Pneumonia/Influenza.....	147	17.0	15.3	3.2	20.4	21.0	3.5	23.8	24.7	4.0
Chronic Obstructive Pulmonary Disease.....	67	13.4	8.7	7.7	20.9	15.0	8.4	23.9	19.6	7.6
Transient Cerebral Ischemia.....	43	0.0	1.5	----	0.0	3.3	----	0.0	5.5	----
Stroke.....	124	12.1	19.3	4.7	18.5	25.9	5.2	21.0	29.7	5.8
Hip Fracture.....	71	5.6	6.2	3.0	8.5	11.2	6.1	11.3	14.6	7.9
Sepsis.....	22	9.1	24.5	----	18.2	31.2	----	22.7	35.6	----
PROCEDURES:										
Angioplasty.....	24	4.2	3.2	----	4.2	3.9	----	4.2	4.7	----
Coronary Artery Bypass Graft.....	68	7.4	5.9	3.3	8.8	8.2	3.6	8.8	9.2	3.9
Initial Pacemaker Insertion.....	20	0.0	1.8	----	0.0	3.7	----	0.0	5.7	----
Carotid Endarterectomy.....	8	0.0	1.6	----	0.0	2.9	----	0.0	4.1	----
Hip Replacement/Reconstruction.....	90	4.4	1.8	2.5	4.4	3.4	2.2	4.4	4.7	3.0
Open Reduction of Hip Fracture.....	35	2.9	6.1	----	5.7	11.4	----	8.6	15.1	----
Prostatectomy.....	107	0.9	0.7	0.8	0.9	1.6	2.0	1.9	2.8	3.1
Cholecystectomy.....	110	2.7	2.1	1.6	3.6	3.9	2.7	3.6	5.2	3.2
Hysterectomy.....	30	3.3	0.7	----	3.3	1.7	----	3.3	2.7	----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



DESERT SAMARITAN MEDICAL CENTER
Medicare Provider Number: 030065

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	73.9 years
Proportion female.....	53.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician....	54.9 %
Transferred from skilled nursing facility.....	0.1 %
Admitted for elective procedure.....	30.3 %
Admitted for emergency.....	61.0 %

COMORBIDITIES:

Cancer.....	10.3 %
Chronic cardiovascular disease.....	33.1 %
Chronic liver disease.....	0.8 %
Chronic renal disease.....	2.2 %
Chronic pulmonary disease.....	12.6 %
Cerebrovascular degeneration.....	2.9 %
Diabetes mellitus.....	6.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	78.9%
State	8.6%
Outside State	12.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.8 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	298
Occupancy Rate	71.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	26.6 %
Case Mix Index (CMI)	1.4348

STAFFING:

Total Number of Physicians.....	368
Percent of Physicians Board Certified Specialists.....	82.6 %
Medical Residents/Interns	0
Registered Nurses.....	422
Licensed Practical Nurses.....	24

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

EL DORADO MEDICAL CENTER

1400 NORTH WILMOT ROAD

TUCSON, AZ 85712

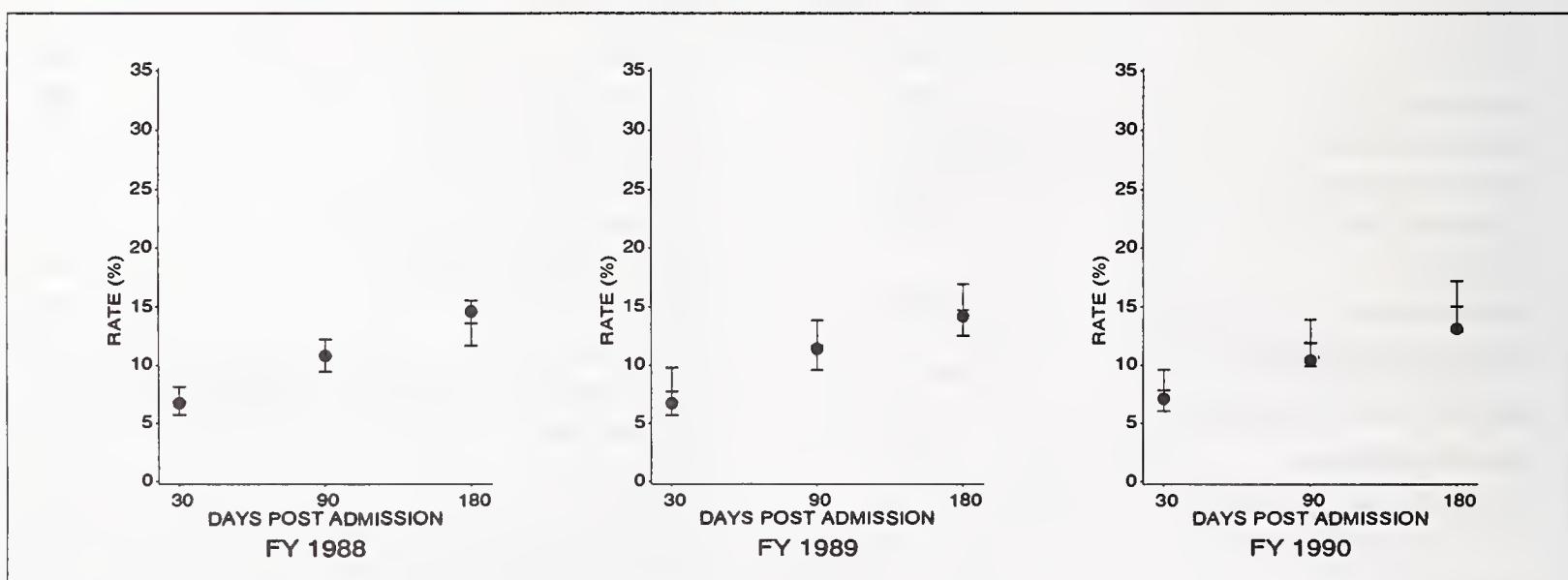
Medicare Provider Number: 030080

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1964	7.1	7.8	0.9	10.4	11.9	1.0	13.1	15.0	1.1
CONDITIONS:										
Acute Myocardial Infarction.....	86	15.1	25.7	8.5	18.6	28.5	8.5	22.1	31.0	8.3
Congestive Heart Failure.....	98	20.4	12.7	4.9	29.6	20.4	6.2	34.7	26.4	7.9
Pneumonia/Influenza.....	64	17.2	14.5	5.0	21.9	20.2	6.0	21.9	23.8	6.4
Chronic Obstructive Pulmonary Disease.....	21	14.3	8.0	-----	19.0	14.3	-----	28.6	19.0	-----
Transient Cerebral Ischemia.....	11	0.0	1.2	-----	0.0	2.9	-----	9.1	4.8	-----
Stroke.....	65	6.2	18.8	6.5	9.2	25.7	7.8	13.8	29.7	8.1
Hip Fracture.....	44	9.1	5.5	-----	13.6	9.9	-----	15.9	13.2	-----
Sepsis.....	11	0.0	28.8	-----	9.1	38.9	-----	9.1	43.7	-----
PROCEDURES:										
Angioplasty.....	75	6.7	3.0	3.0	6.7	4.0	3.5	9.3	5.0	4.4
Coronary Artery Bypass Graft.....	48	4.2	5.5	-----	8.3	7.7	-----	8.3	8.7	-----
Initial Pacemaker Insertion.....	23	0.0	2.9	-----	0.0	5.6	-----	0.0	8.1	-----
Carotid Endarterectomy.....	4	0.0	2.4	-----	0.0	4.4	-----	0.0	6.4	-----
Hip Replacement/Reconstruction.....	48	4.2	2.1	-----	4.2	4.0	-----	4.2	5.5	-----
Open Reduction of Hip Fracture.....	21	9.5	5.6	-----	19.0	10.6	-----	19.0	14.4	-----
Prostatectomy.....	78	1.3	0.7	1.0	2.6	1.7	1.7	6.4	3.0	2.6
Cholecystectomy.....	37	0.0	1.9	-----	2.7	3.7	-----	2.7	5.2	-----
Hysterectomy.....	14	0.0	0.9	-----	0.0	2.0	-----	0.0	3.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



EL DORADO MEDICAL CENTER
Medicare Provider Number: 030080

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	74.4 years
Proportion female.....	51.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	60.8 %
Transferred from skilled nursing facility.....	0.1 %
Admitted for elective procedure.....	30.3 %
Admitted for emergency.....	37.8 %

COMORBIDITIES:

Cancer.....	7.7 %
Chronic cardiovascular disease.....	32.7 %
Chronic liver disease.....	0.9 %
Chronic renal disease.....	1.2 %
Chronic pulmonary disease.....	11.3 %
Cerebrovascular degeneration.....	1.8 %
Diabetes mellitus.....	4.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	82.2%
State	10.1%
Outside State	7.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.0 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	162
Occupancy Rate	54.0 %
Ownership/Control.....	Private, For Profit
Medicare Discharges	57.1 %
Case Mix Index (CMI)	1.4734

STAFFING:

Total Number of Physicians.....	255
Percent of Physicians Board Certified Specialists	75.7 %
Medical Residents/Interns	0
Registered Nurses.....	170
Licensed Practical Nurses.....	16

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug.....	No
Rehabilitation.....	Yes
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

FLAGSTAFF MEDICAL CENTER

1200 NORTH BEAVER STREET

FLAGSTAFF, AZ 86001

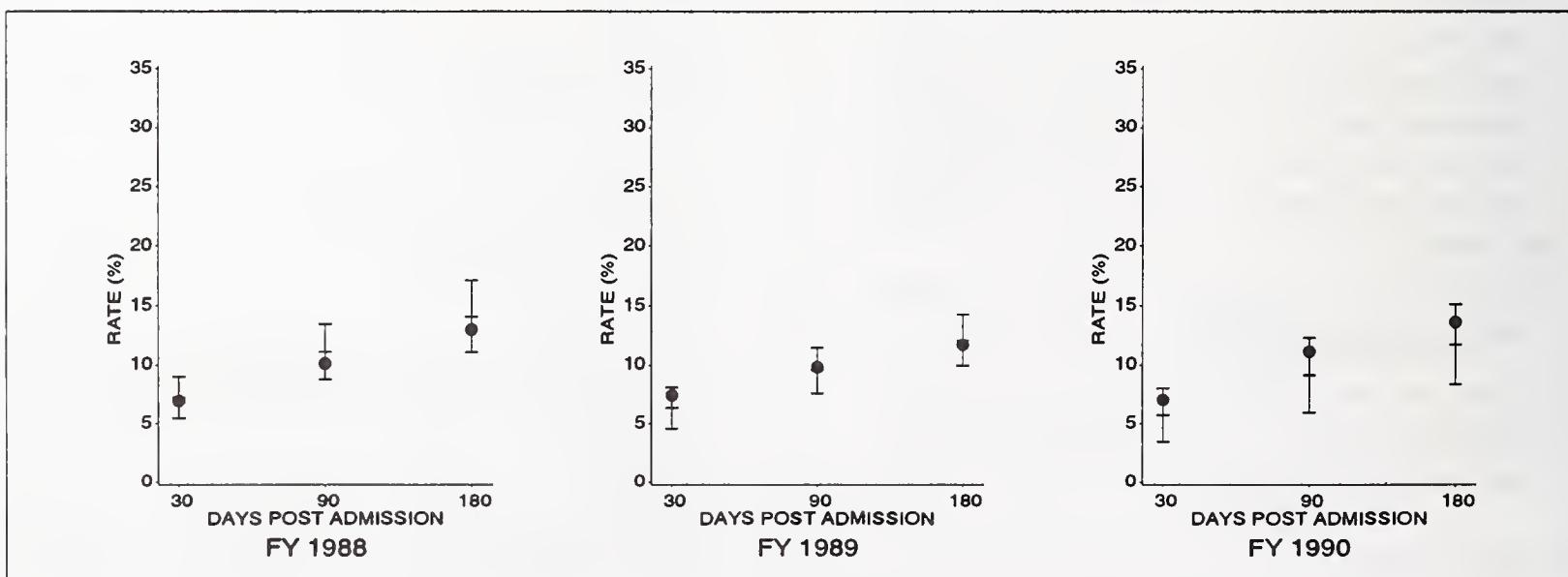
Medicare Provider Number: 030023

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	983	7.0	5.7	1.1	11.1	9.1	1.6	13.6	11.7	1.7
CONDITIONS:										
Acute Myocardial Infarction.....	22	22.7	15.5	-----	22.7	18.6	-----	22.7	21.5	-----
Congestive Heart Failure.....	29	27.6	12.2	-----	31.0	19.9	-----	34.5	25.3	-----
Pneumonia/Influenza.....	44	18.2	10.6	-----	27.3	15.3	-----	29.5	18.6	-----
Chronic Obstructive Pulmonary Disease.....	21	23.8	7.6	-----	23.8	13.5	-----	28.6	17.9	-----
Transient Cerebral Ischemia.....	15	0.0	0.8	-----	0.0	1.9	-----	0.0	3.3	-----
Stroke.....	36	16.7	15.5	-----	25.0	22.0	-----	33.3	25.8	-----
Hip Fracture.....	27	0.0	3.9	-----	11.1	7.2	-----	11.1	9.6	-----
Sepsis.....	4	0.0	32.0	-----	0.0	38.5	-----	0.0	42.1	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	5	0.0	1.2	-----	0.0	2.5	-----	0.0	4.0	-----
Carotid Endarterectomy.....	4	0.0	1.3	-----	25.0	2.4	-----	25.0	3.6	-----
Hip Replacement/Reconstruction.....	27	0.0	1.8	-----	7.4	3.6	-----	7.4	5.1	-----
Open Reduction of Hip Fracture.....	14	0.0	4.2	-----	7.1	7.6	-----	7.1	10.2	-----
Prostatectomy.....	49	0.0	0.4	-----	2.0	1.0	-----	2.0	1.9	-----
Cholecystectomy.....	29	0.0	1.3	-----	6.9	2.4	-----	6.9	3.2	-----
Hysterectomy.....	7	0.0	0.1	-----	0.0	0.3	-----	0.0	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



FLAGSTAFF MEDICAL CENTER
Medicare Provider Number: 030023

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 72.5 years

Proportion female..... 51.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 73.0 %

Transferred from skilled nursing facility..... 0.1 %

Admitted for elective procedure..... 71.3 %

Admitted for emergency..... 25.0 %

COMORBIDITIES:

Cancer..... 5.1 %

Chronic cardiovascular disease..... 19.2 %

Chronic liver disease..... 1.1 %

Chronic renal disease..... 1.9 %

Chronic pulmonary disease..... 10.9 %

Cerebrovascular degeneration..... 2.6 %

Diabetes mellitus..... 4.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City..... 57.0%

State 31.4%

Outside State 11.6%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 5.8 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1989

PROFILE:

Total Beds 128

Occupancy Rate 62.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 22.8 %

Case Mix Index (CMI) 1.2050

STAFFING:

Total Number of Physicians..... 94

Percent of Physicians Board Certified Specialists 91.5 %

Medical Residents/Interns 0

Registered Nurses..... 153

Licensed Practical Nurses..... 7

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric No

Hospice Care Yes

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation Yes

Psychiatric No

Medicare Swing Beds Yes

** Except for CMI

* Not used in calculating mortality rates

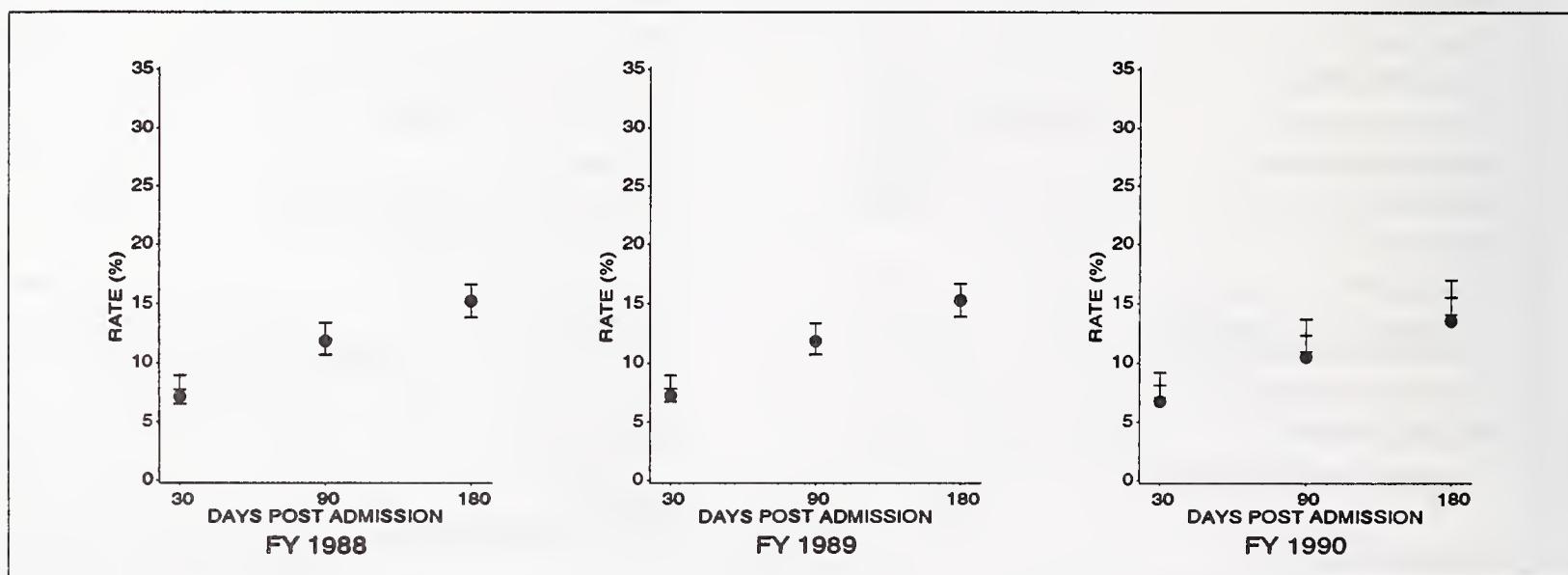
GOOD SAMARITAN REGIONAL MEDICAL CENTER
 1111 EAST McDOWELL RD
 PHOENIX, AZ 85006
 Medicare Provider Number: 030002

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	4219	6.7	8.1	0.5	10.5	12.3	0.7	13.5	15.5	0.7
CONDITIONS:										
Acute Myocardial Infarction.....	161	12.4	22.3	4.6	14.3	25.0	5.0	15.5	27.5	5.1
Congestive Heart Failure.....	128	15.6	14.2	4.1	21.9	22.8	6.2	27.3	29.0	5.6
Pneumonia/Influenza.....	125	10.4	15.8	5.0	16.8	22.0	6.7	19.2	25.9	6.4
Chronic Obstructive Pulmonary Disease.....	82	2.4	6.8	3.7	11.0	11.8	4.8	17.1	15.9	5.5
Transient Cerebral Ischemia.....	32	0.0	1.2	----	3.1	2.7	----	9.4	4.3	----
Stroke.....	127	18.1	22.5	6.2	24.4	28.7	7.8	29.9	32.3	7.8
Hip Fracture.....	78	1.3	6.7	4.3	6.4	11.8	5.4	9.0	15.1	6.0
Sepsis.....	59	13.6	22.0	7.4	20.3	29.7	8.1	25.4	34.1	8.4
PROCEDURES:										
Angioplasty.....	100	2.0	3.3	2.3	4.0	4.3	2.8	4.0	5.3	3.0
Coronary Artery Bypass Graft.....	163	4.3	5.8	2.8	6.1	8.3	3.0	9.2	9.5	2.7
Initial Pacemaker Insertion.....	43	4.7	3.1	----	9.3	6.1	----	11.6	9.0	----
Carotid Endarterectomy.....	22	0.0	1.2	----	0.0	2.2	----	0.0	3.3	----
Hip Replacement/Reconstruction.....	89	1.1	2.0	1.7	2.2	3.5	2.8	2.2	4.8	3.2
Open Reduction of Hip Fracture.....	34	0.0	7.4	----	11.8	13.4	----	14.7	17.3	----
Prostatectomy.....	132	0.0	0.8	----	0.0	1.9	----	0.8	3.3	----
Cholecystectomy.....	80	0.0	3.4	3.5	5.0	5.7	2.9	7.5	7.3	2.9
Hysterectomy.....	58	0.0	0.4	0.8	0.0	0.9	1.4	0.0	1.5	2.1

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



GOOD SAMARITAN REGIONAL MEDICAL CENTER

Medicare Provider Number: 030002

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 70.6 years

Proportion female..... 53.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 55.7 %

Transferred from skilled nursing facility..... 0.6 %

Admitted for elective procedure..... 31.6 %

Admitted for emergency..... 36.8 %

COMORBIDITIES:

Cancer..... 7.4 %

Chronic cardiovascular disease..... 35.6 %

Chronic liver disease..... 0.9 %

Chronic renal disease..... 6.9 %

Chronic pulmonary disease..... 14.0 %

Cerebrovascular degeneration..... 2.7 %

Diabetes mellitus..... 9.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 75.8%

State 17.5%

Outside State 6.7%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 7.5 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1989

PROFILE:

Total Beds 585

Occupancy Rate 72.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 28.5 %

Case Mix Index (CMI) 1.6734

STAFFING:

Total Number of Physicians.....1034

Percent of Physicians Board Certified Specialists 63.3 %

Medical Residents/Interns 86

Registered Nurses..... 877

Licensed Practical Nurses..... 130

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care Yes

Comprehensive Geriatric Yes

Hospice Care No

Medical/Surgical Intensive Care..... Yes

Organ/Tissue Transplant Yes

Other Intensive Care No

Trauma Center Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation..... Yes

Psychiatric Yes

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

HAVASU SAMARITAN REGIONAL HOSPITAL

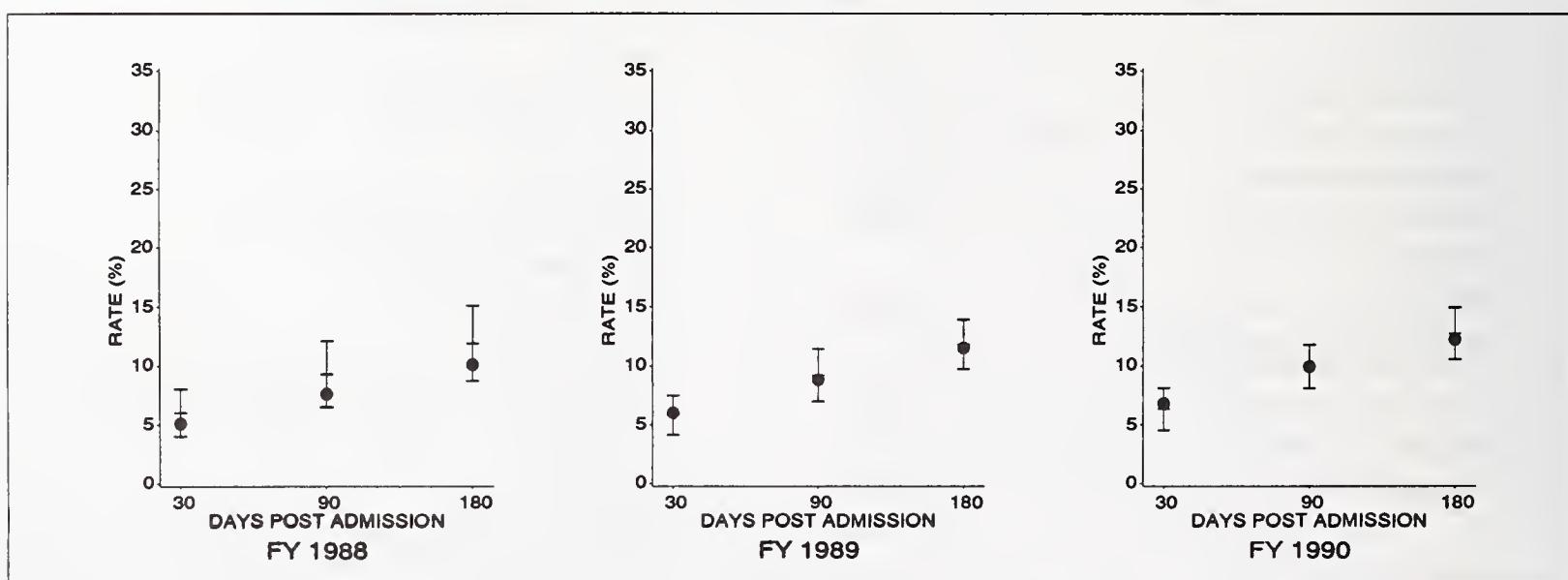
101 CIVIC CENTER LANE
LAKE HAVASU CITY, AZ 86403
Medicare Provider Number: 030069

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1019	6.8	6.3	0.9	9.9	9.9	0.9	12.2	12.7	1.1
CONDITIONS:										
Acute Myocardial Infarction.....	20	20.0	21.6	-----	20.0	24.7	-----	20.0	27.6	-----
Congestive Heart Failure.....	36	22.2	13.3	-----	36.1	21.3	-----	38.9	27.3	-----
Pneumonia/Influenza.....	31	12.9	14.1	-----	16.1	19.7	-----	19.4	23.4	-----
Chronic Obstructive Pulmonary Disease.....	35	5.7	8.7	-----	11.4	15.1	-----	11.4	19.9	-----
Transient Cerebral Ischemia.....	14	7.1	1.3	-----	14.3	2.9	-----	14.3	4.6	-----
Stroke.....	32	21.9	17.4	-----	25.0	23.1	-----	34.4	26.8	-----
Hip Fracture.....	32	0.0	5.0	-----	6.3	8.9	-----	6.3	11.9	-----
Sepsis.....	7	0.0	25.2	-----	0.0	30.2	-----	0.0	33.6	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	31	0.0	2.4	-----	0.0	4.3	-----	0.0	5.8	-----
Open Reduction of Hip Fracture.....	20	0.0	4.6	-----	10.0	8.5	-----	10.0	11.4	-----
Prostatectomy.....	96	0.0	0.9	1.2	2.1	2.0	1.8	3.1	3.4	2.4
Cholecystectomy.....	29	0.0	2.0	-----	3.4	4.0	-----	6.9	5.4	-----
Hysterectomy.....	23	4.3	0.4	-----	4.3	0.8	-----	4.3	1.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HAVASU SAMARITAN REGIONAL HOSPITAL
Medicare Provider Number: 030069

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	72.8 years
Proportion female.....	47.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	73.0 %
Transferred from skilled nursing facility.....	0.1 %
Admitted for elective procedure.....	10.8 %
Admitted for emergency.....	70.4 %

COMORBIDITIES:

Cancer.....	8.2 %
Chronic cardiovascular disease.....	26.7 %
Chronic liver disease.....	1.3 %
Chronic renal disease.....	2.4 %
Chronic pulmonary disease.....	17.5 %
Cerebrovascular degeneration.....	2.0 %
Diabetes mellitus.....	5.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City.....	71.1%
State	9.2%
Outside State	19.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.8 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	83
Occupancy Rate	51.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	40.4 %
Case Mix Index (CMI)	1.2308

STAFFING:

Total Number of Physicians.....	33
Percent of Physicians Board Certified Specialists.....	57.6 %
Medical Residents/Interns	0
Registered Nurses.....	88
Licensed Practical Nurses.....	22

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

HOLY CROSS HOSPITAL INC

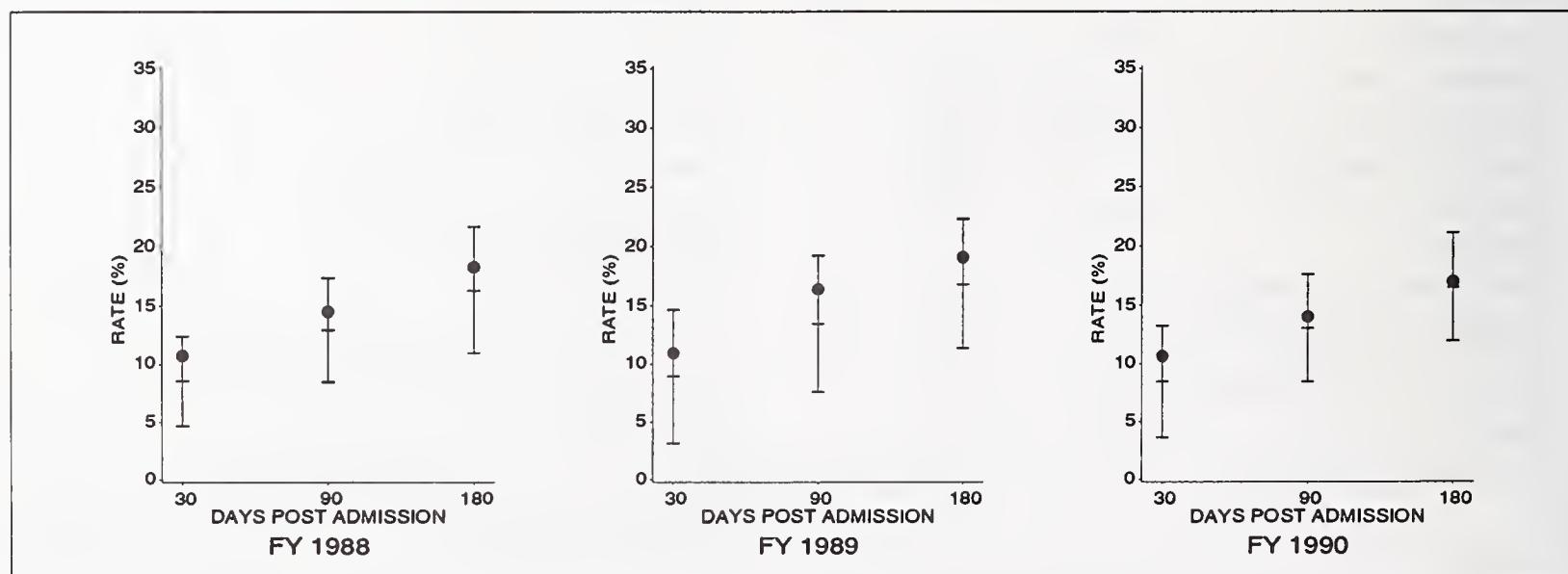
1230 TARGET RANGE RD
NOGALES, AZ 85621
Medicare Provider Number: 030040

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	265	10.6	8.4	2.4	14.0	13.0	2.3	17.0	16.5	2.3
CONDITIONS:										
Acute Myocardial Infarction.....	11	18.2	17.4	-----	18.2	21.6	-----	18.2	25.1	-----
Congestive Heart Failure.....	7	0.0	15.7	-----	0.0	25.2	-----	0.0	32.2	-----
Pneumonia/Influenza.....	12	25.0	12.0	-----	33.3	16.7	-----	33.3	20.1	-----
Chronic Obstructive Pulmonary Disease.....	1	0.0	2.5	-----	0.0	4.8	-----	0.0	7.6	-----
Transient Cerebral Ischemia.....	3	0.0	1.1	-----	0.0	2.4	-----	0.0	3.9	-----
Stroke.....	10	10.0	16.0	-----	20.0	21.7	-----	30.0	25.4	-----
Hip Fracture.....	2	50.0	6.3	-----	50.0	10.3	-----	50.0	13.2	-----
Sepsis.....	3	33.3	21.8	-----	33.3	33.9	-----	33.3	42.5	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	1	0.0	2.2	-----	0.0	4.3	-----	0.0	5.9	-----
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	15	0.0	0.5	-----	0.0	1.1	-----	0.0	1.9	-----
Cholecystectomy.....	8	0.0	1.6	-----	0.0	2.6	-----	0.0	3.5	-----
Hysterectomy.....	3	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HOLY CROSS HOSPITAL INC
Medicare Provider Number: 030040

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	75.2 years
Proportion female.....	48.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	51.9 %
Transferred from skilled nursing facility.....	0.4 %
Admitted for elective procedure.....	28.2 %
Admitted for emergency.....	6.4 %

COMORBIDITIES:

Cancer.....	7.1 %
Chronic cardiovascular disease.....	28.9 %
Chronic liver disease.....	0.8 %
Chronic renal disease.....	1.9 %
Chronic pulmonary disease.....	14.7 %
Cerebrovascular degeneration.....	3.8 %
Diabetes mellitus.....	6.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	86.8%
State	3.8%
Outside State	9.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.8 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1991

PROFILE:

Total Beds	31
Ownership/Control.....	Church
Case Mix Index (CMI)	1.0017

STAFFING:

Medical Residents/Interns	0
Registered Nurses.....	16
Licensed Practical Nurses.....	8

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	Yes
Hospice Care	Yes
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

HUMANA HOSPITAL DESERT VALLEY

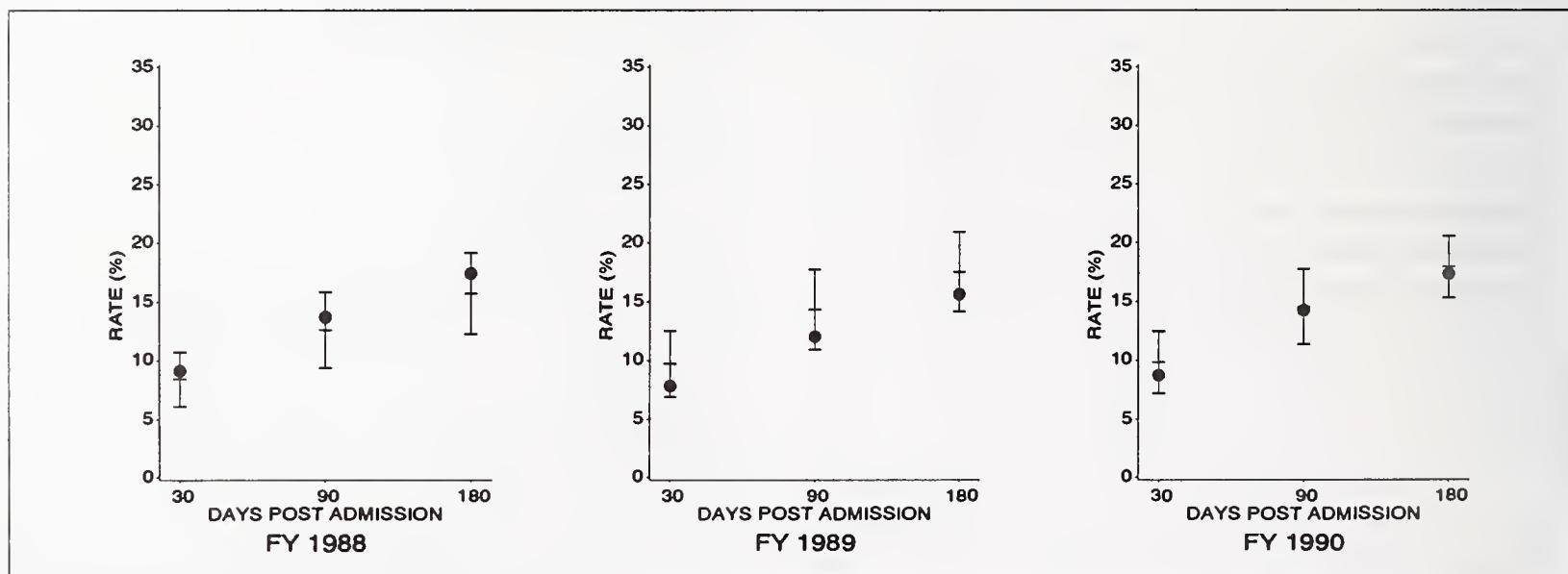
3929 EAST BELL RD
PHOENIX, AZ 85032
Medicare Provider Number: 030083

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1329	8.7	9.8	1.3	14.2	14.5	1.6	17.3	17.9	1.3
CONDITIONS:										
Acute Myocardial Infarction.....	37	27.0	28.5	-----	35.1	31.5	-----	35.1	34.2	-----
Congestive Heart Failure.....	60	13.3	14.9	5.6	23.3	24.0	6.9	26.7	30.3	6.8
Pneumonia/Influenza.....	71	7.0	13.9	5.8	11.3	19.3	7.0	15.5	22.8	6.7
Chronic Obstructive Pulmonary Disease.....	37	0.0	8.3	-----	2.7	14.2	-----	10.8	18.5	-----
Transient Cerebral Ischemia.....	20	0.0	1.9	-----	0.0	4.3	-----	0.0	7.1	-----
Stroke.....	55	25.5	21.8	8.2	34.5	28.6	8.0	40.0	32.2	9.2
Hip Fracture.....	50	2.0	6.2	-----	14.0	10.9	-----	20.0	14.3	-----
Sepsis.....	18	27.8	28.9	-----	50.0	36.9	-----	50.0	41.6	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	10	0.0	4.2	-----	10.0	8.6	-----	10.0	12.5	-----
Carotid Endarterectomy.....	2	0.0	1.2	-----	0.0	2.4	-----	0.0	3.3	-----
Hip Replacement/Reconstruction.....	22	0.0	3.9	-----	4.5	7.1	-----	9.1	9.3	-----
Open Reduction of Hip Fracture.....	26	0.0	5.0	-----	11.5	8.8	-----	15.4	11.6	-----
Prostatectomy.....	57	0.0	1.0	1.6	0.0	2.4	2.9	1.8	4.0	3.2
Cholecystectomy.....	45	0.0	1.7	-----	0.0	2.9	-----	2.2	3.7	-----
Hysterectomy.....	12	0.0	0.1	-----	0.0	0.3	-----	0.0	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HUMANA HOSPITAL DESERT VALLEY

Medicare Provider Number: 030083

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	74.4 years
Proportion female.....	53.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	49.6 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	22.4 %
Admitted for emergency.....	53.7 %

COMORBIDITIES:

Cancer.....	7.3 %
Chronic cardiovascular disease.....	39.8 %
Chronic liver disease.....	0.8 %
Chronic renal disease.....	2.2 %
Chronic pulmonary disease.....	27.0 %
Cerebrovascular degeneration.....	2.6 %
Diabetes mellitus.....	7.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	84.8%
State	5.3%
Outside State	9.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.2 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	140
Occupancy Rate	42.0 %
Ownership/Control.....	Private, For Profit
Medicare Discharges	40.0 %
Case Mix Index (CMI)	1.3701

STAFFING:

Total Number of Physicians.....	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	0
Registered Nurses.....	93
Licensed Practical Nurses.....	4

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

HUMANA HOSPITAL PHOENIX

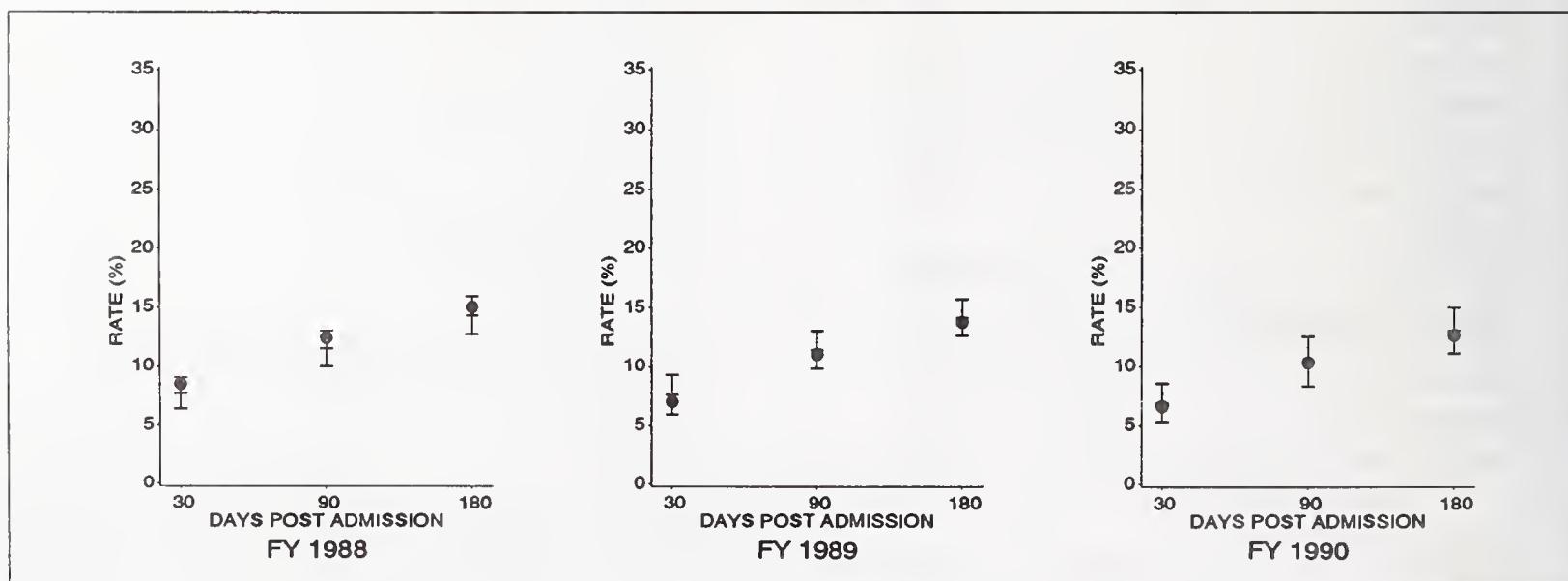
1947 EAST THOMAS RD
PHOENIX, AZ 85016
Medicare Provider Number: 030008

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	3210	6.6	6.9	0.8	10.3	10.4	1.1	12.6	13.0	1.0
CONDITIONS:										
Acute Myocardial Infarction.....	70	12.9	25.7	7.5	17.1	28.4	7.2	21.4	30.9	7.3
Congestive Heart Failure.....	97	10.3	14.7	6.5	15.5	23.2	6.7	23.7	29.6	6.6
Pneumonia/Influenza.....	106	16.0	15.9	3.6	21.7	21.7	4.1	22.6	25.4	4.6
Chronic Obstructive Pulmonary Disease.....	35	2.9	7.2	-----	14.3	13.1	-----	22.9	17.6	-----
Transient Cerebral Ischemia.....	37	2.7	1.4	-----	5.4	3.3	-----	5.4	5.3	-----
Stroke.....	87	12.6	19.8	7.0	16.1	25.3	8.1	18.4	28.7	8.2
Hip Fracture.....	74	6.8	6.3	2.9	10.8	11.1	4.4	18.9	14.4	6.5
Sepsis.....	31	38.7	26.9	-----	48.4	33.8	-----	48.4	37.8	-----
PROCEDURES:										
Angioplasty.....	120	3.3	2.4	1.6	3.3	3.2	1.6	3.3	4.0	1.9
Coronary Artery Bypass Graft.....	112	5.4	4.7	2.2	8.0	6.5	2.9	12.5	7.3	4.7
Initial Pacemaker Insertion.....	33	6.1	2.9	-----	6.1	5.3	-----	6.1	7.3	-----
Carotid Endarterectomy.....	35	8.6	1.3	-----	11.4	2.4	-----	11.4	3.5	-----
Hip Replacement/Reconstruction.....	168	2.4	1.5	1.2	4.2	2.9	1.5	7.7	4.1	2.9
Open Reduction of Hip Fracture.....	38	2.6	6.3	-----	5.3	11.5	-----	13.2	15.0	-----
Prostatectomy.....	85	2.4	0.9	1.4	7.1	2.1	3.7	7.1	3.7	3.5
Cholecystectomy.....	68	0.0	2.5	2.6	4.4	4.8	2.6	10.3	6.5	4.3
Hysterectomy.....	31	0.0	0.2	-----	0.0	0.4	-----	0.0	0.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



HUMANA HOSPITAL PHOENIX
Medicare Provider Number: 030008

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	73.0 years
Proportion female.....	54.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	62.9 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	38.3 %
Admitted for emergency.....	35.1 %

COMORBIDITIES:

Cancer.....	5.0 %
Chronic cardiovascular disease.....	33.8 %
Chronic liver disease.....	1.0 %
Chronic renal disease.....	3.0 %
Chronic pulmonary disease.....	16.9 %
Cerebrovascular degeneration.....	1.6 %
Diabetes mellitus.....	7.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City.....	77.5%
State	11.7%
Outside State	10.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.4 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	301
Occupancy Rate	43.0 %
Ownership/Control.....	Private, For Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.7527

STAFFING:

Total Number of Physicians.....	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	(Not Available)
Registered Nurses.....	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

JOHN C. LINCOLN HOSPITAL & HEALTH CENTER

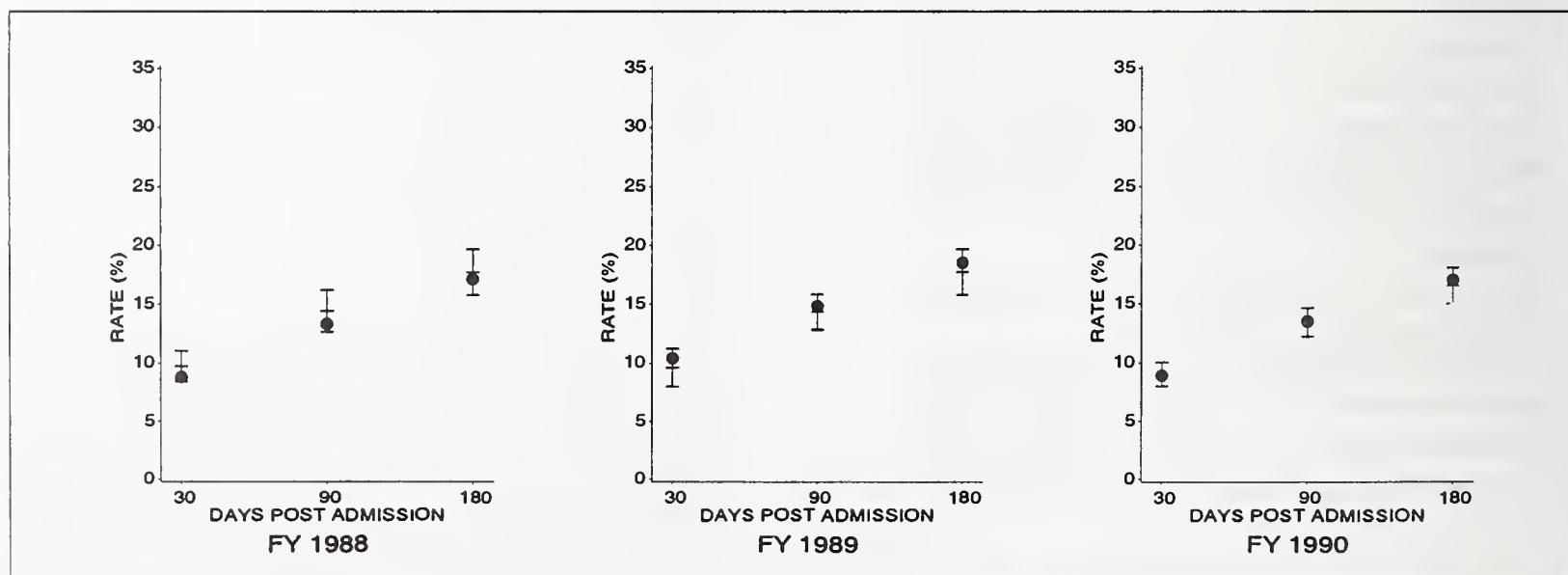
9211 NORTH 2ND STREET
PHOENIX, AZ 85020
Medicare Provider Number: 030014

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	3301	8.9	9.0	0.5	13.5	13.4	0.6	17.0	16.5	0.8
CONDITIONS:										
Acute Myocardial Infarction.....	134	21.6	22.5	4.2	24.6	25.4	4.4	28.4	28.0	4.5
Congestive Heart Failure.....	126	17.5	13.5	4.5	24.6	21.8	4.2	28.6	27.8	4.0
Pneumonia/Influenza.....	144	9.7	13.5	4.3	14.6	18.6	4.3	21.5	22.1	3.5
Chronic Obstructive Pulmonary Disease.....	115	10.4	7.2	2.9	17.4	12.7	3.8	21.7	16.9	5.1
Transient Cerebral Ischemia.....	35	5.7	2.1	-----	8.6	4.7	-----	14.3	7.5	-----
Stroke.....	97	23.7	20.3	8.3	32.0	26.5	7.7	35.1	30.3	7.9
Hip Fracture.....	100	3.0	6.4	3.6	6.0	11.0	5.3	9.0	14.1	6.0
Sepsis.....	54	16.7	24.4	8.1	22.2	30.6	9.3	25.9	35.0	10.5
PROCEDURES:										
Angioplasty.....	38	0.0	3.1	-----	0.0	4.1	-----	0.0	5.0	-----
Coronary Artery Bypass Graft.....	42	2.4	6.5	-----	4.8	9.1	-----	4.8	10.1	-----
Initial Pacemaker Insertion.....	40	0.0	2.2	-----	2.5	4.4	-----	5.0	6.6	-----
Carotid Endarterectomy.....	22	0.0	1.4	-----	0.0	2.7	-----	0.0	3.9	-----
Hip Replacement/Reconstruction.....	62	3.2	3.9	3.2	6.5	6.9	3.4	6.5	8.9	4.4
Open Reduction of Hip Fracture.....	52	0.0	5.0	5.8	1.9	8.8	7.9	5.8	11.6	7.2
Prostatectomy.....	146	0.7	0.8	0.7	2.1	1.8	1.2	2.1	3.1	2.9
Cholecystectomy.....	70	1.4	2.7	2.2	2.9	4.8	3.0	5.7	6.4	3.1
Hysterectomy.....	41	0.0	0.4	-----	0.0	0.8	-----	0.0	1.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



JOHN C. LINCOLN HOSPITAL & HEALTH CENTER
 Medicare Provider Number: 030014

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 73.9 years

Proportion female..... 55.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 38.8 %

Transferred from skilled nursing facility..... 0.1 %

Admitted for elective procedure..... 19.6 %

Admitted for emergency..... 57.5 %

COMORBIDITIES:

Cancer..... 6.5 %

Chronic cardiovascular disease..... 29.6 %

Chronic liver disease..... 0.8 %

Chronic renal disease..... 2.0 %

Chronic pulmonary disease..... 18.4 %

Cerebrovascular degeneration..... 2.4 %

Diabetes mellitus..... 6.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 92.0%

State 2.9%

Outside State 5.1%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 6.6 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 253

Occupancy Rate 66.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 29.4 %

Case Mix Index (CMI) 1.4259

STAFFING:

Total Number of Physicians..... 153

Percent of Physicians Board Certified Specialists..... 77.8 %

Medical Residents/Interns (Not Available)

Registered Nurses..... (Not Available)

Licensed Practical Nurses (Not Available)

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care Yes

Comprehensive Geriatric No

Hospice Care No

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation Yes

Psychiatric No

Medicare Swing Beds Yes

** Except for CMI

* Not used in calculating mortality rates

KINGMAN REGIONAL MEDICAL CENTER

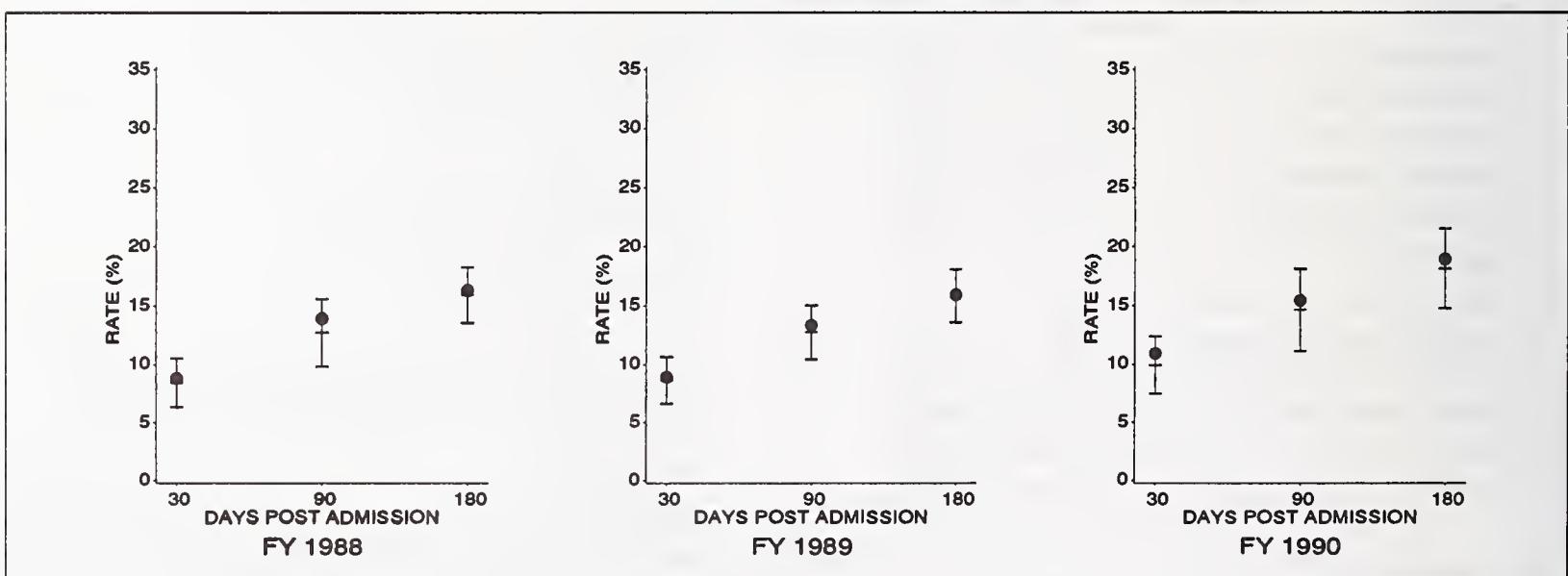
3269 STOCKTON HILL RD
KINGMAN, AZ 86401
Medicare Provider Number: 030055

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1127	10.9	9.9	1.2	15.4	14.6	1.8	18.9	18.1	1.7
CONDITIONS:										
Acute Myocardial Infarction.....	30	46.7	25.4	-----	50.0	27.8	-----	50.0	30.3	-----
Congestive Heart Failure.....	67	14.9	14.1	4.4	23.9	22.7	5.9	28.4	28.9	10.0
Pneumonia/Influenza.....	59	13.6	14.4	4.9	23.7	19.6	7.0	28.8	23.2	7.4
Chronic Obstructive Pulmonary Disease.....	24	4.2	7.2	-----	8.3	12.6	-----	12.5	16.9	-----
Transient Cerebral Ischemia.....	22	4.5	1.8	-----	9.1	4.1	-----	13.6	6.7	-----
Stroke.....	50	16.0	18.1	-----	20.0	24.2	-----	24.0	27.9	-----
Hip Fracture.....	36	13.9	6.2	-----	19.4	10.9	-----	22.2	13.9	-----
Sepsis.....	6	50.0	28.9	-----	50.0	37.7	-----	50.0	42.7	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	11	9.1	5.6	-----	18.2	8.6	-----	27.3	11.3	-----
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	12	8.3	3.9	-----	8.3	7.3	-----	8.3	10.1	-----
Open Reduction of Hip Fracture.....	21	14.3	5.7	-----	23.8	10.3	-----	28.6	13.4	-----
Prostatectomy.....	36	2.8	1.5	-----	8.3	3.7	-----	8.3	6.3	-----
Cholecystectomy.....	22	0.0	2.2	-----	9.1	4.1	-----	9.1	5.5	-----
Hysterectomy.....	8	12.5	2.8	-----	12.5	6.7	-----	25.0	10.8	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



KINGMAN REGIONAL MEDICAL CENTER
Medicare Provider Number: 030055

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 73.9 years

Proportion female..... 51.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 36.4 %

Transferred from skilled nursing facility..... 0.5 %

Admitted for elective procedure..... 0.0 %

Admitted for emergency..... 61.7 %

COMORBIDITIES:

Cancer..... 6.7 %

Chronic cardiovascular disease..... 39.7 %

Chronic liver disease..... 1.2 %

Chronic renal disease..... 2.5 %

Chronic pulmonary disease..... 33.1 %

Cerebrovascular degeneration..... 1.1 %

Diabetes mellitus..... 10.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 88.0%

State 4.3%

Outside State 7.7%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 7.7 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 79

Occupancy Rate 71.0 %

Ownership/Control..... District/Authority

Medicare Discharges 34.4 %

Case Mix Index (CMI) 1.2092

STAFFING:

Total Number of Physicians..... 19

Percent of Physicians Board Certified Specialists..... 57.9 %

Medical Residents/Interns 0

Registered Nurses..... 89

Licensed Practical Nurses..... 20

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric No

Hospice Care Yes

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

KINO COMMUNITY HOSPITAL

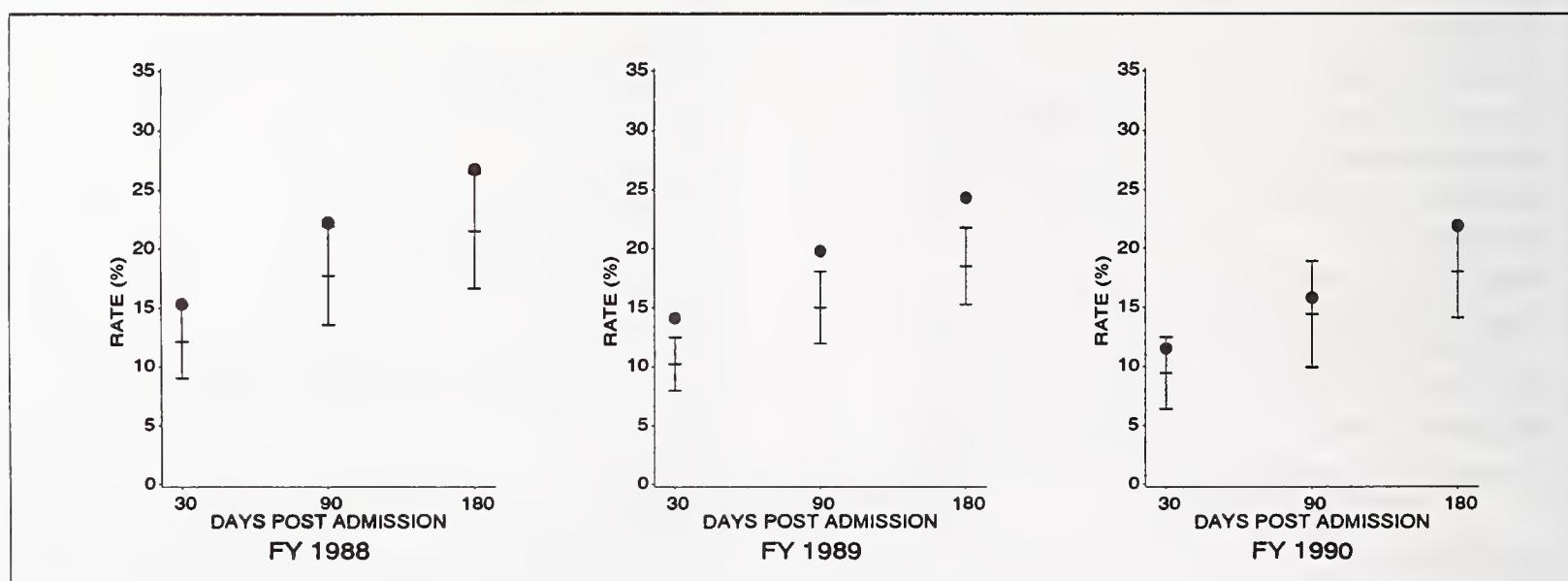
2800 EAST AJO WAY
TUCSON, AZ 85713
Medicare Provider Number: 030009

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	740	11.5	9.4	1.5	15.8	14.4	2.3	21.9	18.0	2.0
CONDITIONS:										
Acute Myocardial Infarction.....	31	29.0	27.6	-----	29.0	30.3	-----	32.3	32.9	-----
Congestive Heart Failure.....	40	7.5	14.1	-----	12.5	22.1	-----	30.0	28.3	-----
Pneumonia/Influenza.....	47	31.9	17.8	-----	36.2	24.2	-----	40.4	28.1	-----
Chronic Obstructive Pulmonary Disease.....	18	11.1	9.3	-----	22.2	15.6	-----	27.8	19.9	-----
Transient Cerebral Ischemia.....	4	0.0	2.1	-----	0.0	4.8	-----	0.0	7.7	-----
Stroke.....	25	24.0	17.7	-----	28.0	24.8	-----	36.0	28.7	-----
Hip Fracture.....	36	5.6	6.1	-----	5.6	11.2	-----	8.3	14.7	-----
Sepsis.....	13	46.2	17.9	-----	53.8	23.6	-----	53.8	27.6	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	2	0.0	0.9	-----	0.0	2.1	-----	0.0	3.2	-----
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	6	0.0	3.1	-----	0.0	6.2	-----	0.0	8.8	-----
Open Reduction of Hip Fracture.....	26	7.7	4.8	-----	7.7	9.0	-----	7.7	12.0	-----
Prostatectomy.....	5	0.0	0.7	-----	0.0	1.9	-----	0.0	3.5	-----
Cholecystectomy.....	7	0.0	2.4	-----	0.0	4.1	-----	0.0	5.3	-----
Hysterectomy.....	1	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



KINO COMMUNITY HOSPITAL
Medicare Provider Number: 030009

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 70.8 years

Proportion female..... 62.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 19.9 %

Transferred from skilled nursing facility..... 0.1 %

Admitted for elective procedure..... 2.3 %

Admitted for emergency..... 74.9 %

COMORBIDITIES:

Cancer..... 3.1 %

Chronic cardiovascular disease..... 34.9 %

Chronic liver disease..... 1.6 %

Chronic renal disease..... 3.9 %

Chronic pulmonary disease..... 13.9 %

Cerebrovascular degeneration..... 13.5 %

Diabetes mellitus..... 10.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 91.5%

State 4.1%

Outside State 4.4%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 7.4 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 115

Occupancy Rate 67.0 %

Ownership/Control..... Local Government

Medicare Discharges(Not Available)

Case Mix Index (CMI) 1.2047

STAFFING:

Total Number of Physicians.....(Not Available)

Percent of Physicians Board Certified Specialists(Not Available)

Medical Residents/Interns(Not Available)

Registered Nurses.....(Not Available)

Licensed Practical Nurses(Not Available)

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric Yes

Hospice Care No

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric Yes

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

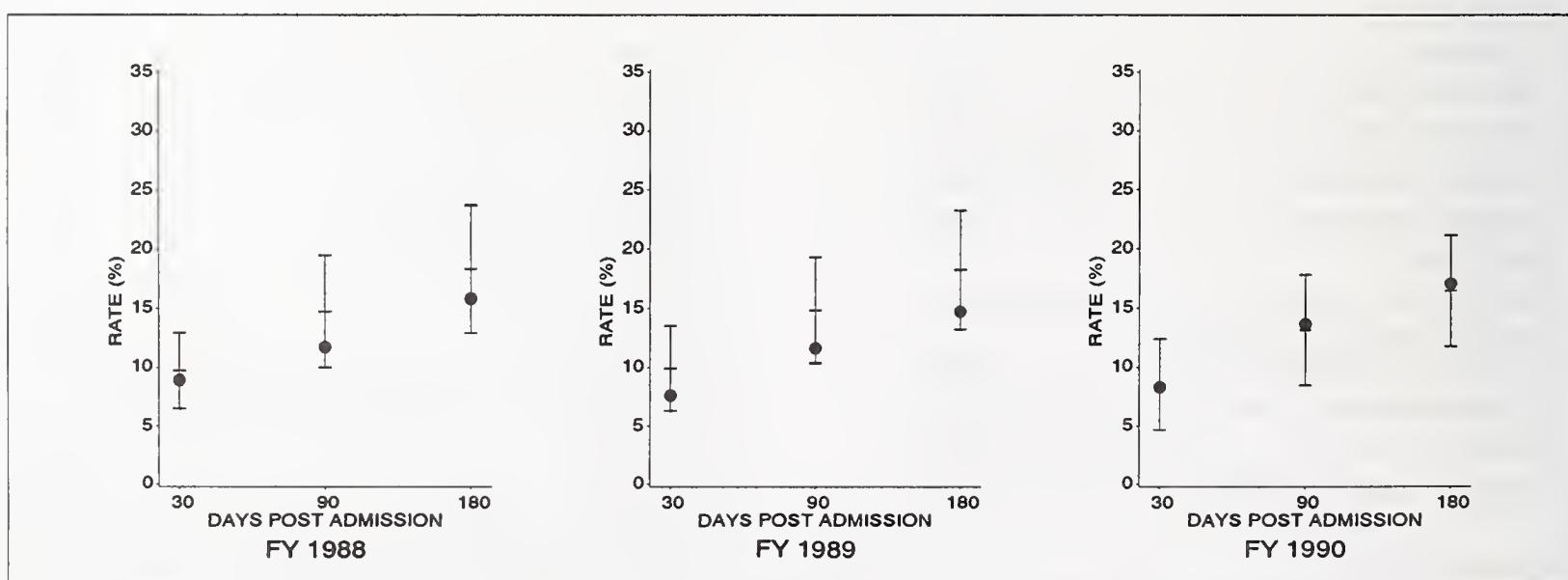
LEWIS R. PYLE MEMORIAL HOSPITAL
 807 SOUTH PONDEROSA
 PAYSON, AZ 85541
 Medicare Provider Number: 030033

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	435	8.3	8.5	1.9	13.6	13.1	2.3	17.0	16.4	2.3
CONDITIONS:										
Acute Myocardial Infarction.....	5	20.0	23.4	-----	40.0	26.1	-----	40.0	28.5	-----
Congestive Heart Failure.....	21	19.0	12.6	-----	33.3	20.3	-----	38.1	26.5	-----
Pneumonia/Influenza.....	36	13.9	15.1	-----	22.2	21.2	-----	27.8	25.1	-----
Chronic Obstructive Pulmonary Disease.....	4	0.0	4.7	-----	25.0	9.1	-----	25.0	13.1	-----
Transient Cerebral Ischemia.....	4	0.0	2.7	-----	0.0	6.1	-----	0.0	9.6	-----
Stroke.....	17	29.4	19.1	-----	35.3	26.9	-----	41.2	31.7	-----
Hip Fracture.....	18	16.7	7.1	-----	22.2	12.1	-----	27.8	15.6	-----
Sepsis.....	13	0.0	18.9	-----	15.4	24.4	-----	23.1	28.1	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	3	0.0	5.5	-----	0.0	11.0	-----	0.0	15.9	-----
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	7	0.0	5.5	-----	14.3	10.4	-----	28.6	13.8	-----
Open Reduction of Hip Fracture.....	10	30.0	6.4	-----	30.0	10.6	-----	30.0	13.9	-----
Prostatectomy.....	0									
Cholecystectomy.....	13	7.7	1.9	-----	7.7	3.1	-----	7.7	3.9	-----
Hysterectomy.....	8	0.0	0.8	-----	0.0	2.0	-----	0.0	3.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



LEWIS R. PYLE MEMORIAL HOSPITAL
Medicare Provider Number: 030033

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	74.6 years
Proportion female.....	57.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	88.3 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	8.7 %
Admitted for emergency.....	55.9 %

COMORBIDITIES:

Cancer.....	6.2 %
Chronic cardiovascular disease.....	37.2 %
Chronic liver disease.....	2.1 %
Chronic renal disease.....	2.3 %
Chronic pulmonary disease.....	40.7 %
Cerebrovascular degeneration.....	3.0 %
Diabetes mellitus.....	9.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	88.5%
State	9.3%
Outside State	2.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.8 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	44
Occupancy Rate	31.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	56.1 %
Case Mix Index (CMI)	1.4063

STAFFING:

Total Number of Physicians.....	(Not Available)
Percent of Physicians Board Certified Specialists	(Not Available)
Medical Residents/Interns	0
Registered Nurses.....	29
Licensed Practical Nurses.....	4

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

MARCUS J. LAWRENCE MEMORIAL HOSPITAL

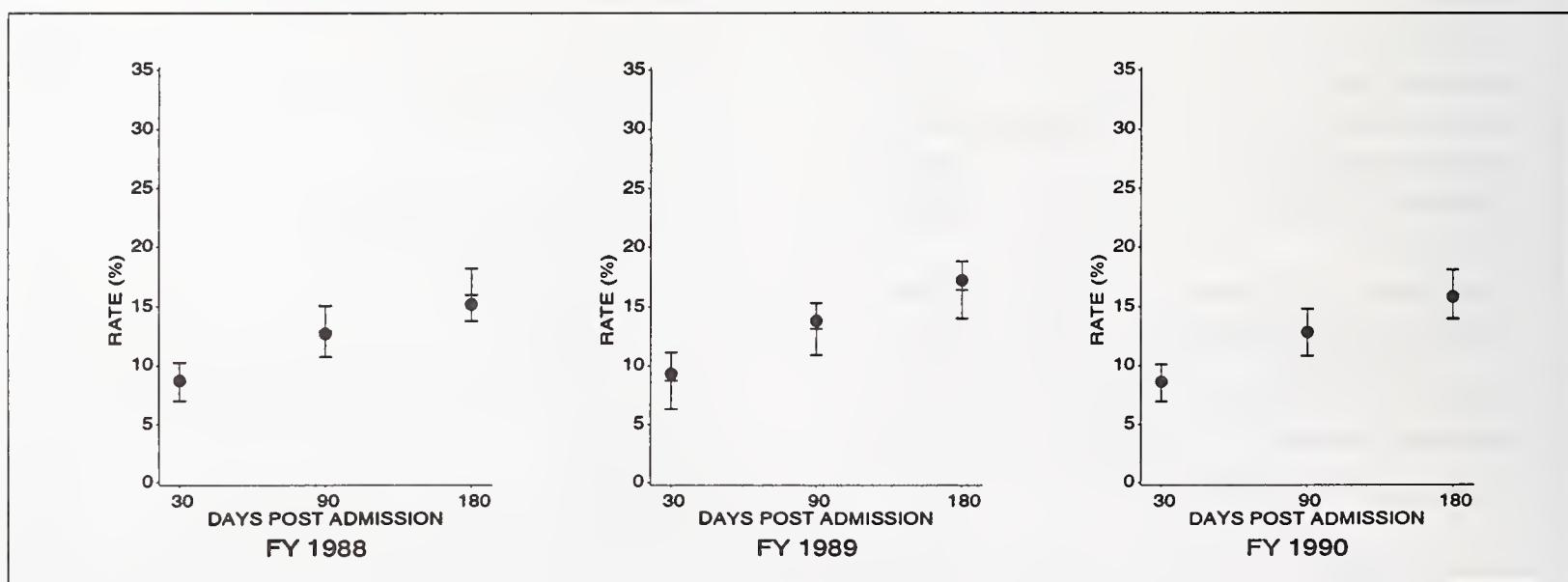
202 SOUTH WILLARD ST
COTTONWOOD, AZ 86326
Medicare Provider Number: 030007

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1277	8.6	8.5	0.8	12.8	12.8	1.0	15.8	16.0	1.0
CONDITIONS:										
Acute Myocardial Infarction.....	52	36.5	24.5	6.7	38.5	26.7	6.8	40.4	29.0	7.1
Congestive Heart Failure.....	44	11.4	13.4	-----	15.9	20.4	-----	22.7	26.0	-----
Pneumonia/Influenza.....	96	10.4	13.9	4.2	15.6	19.3	5.0	16.7	22.8	5.9
Chronic Obstructive Pulmonary Disease.....	37	5.4	7.4	-----	5.4	13.2	-----	8.1	17.6	-----
Transient Cerebral Ischemia.....	10	10.0	1.3	-----	10.0	2.8	-----	20.0	4.6	-----
Stroke.....	41	24.4	16.0	-----	31.7	22.1	-----	34.1	25.8	-----
Hip Fracture.....	64	4.7	6.5	3.4	12.5	11.5	4.2	18.8	14.9	5.9
Sepsis.....	21	23.8	23.2	-----	38.1	31.5	-----	38.1	36.3	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	57	0.0	3.9	5.6	8.8	7.2	4.2	14.0	9.5	5.0
Open Reduction of Hip Fracture.....	22	9.1	5.4	-----	13.6	9.5	-----	13.6	12.7	-----
Prostatectomy.....	71	0.0	0.7	1.1	1.4	1.6	1.7	1.4	2.8	2.3
Cholecystectomy.....	34	0.0	1.5	-----	0.0	2.7	-----	0.0	3.7	-----
Hysterectomy.....	6	0.0	0.3	-----	0.0	0.7	-----	0.0	1.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MARCUS J. LAWRENCE MEMORIAL HOSPITAL
Medicare Provider Number: 030007

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 74.9 years

Proportion female..... 51.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 42.3 %

Transferred from skilled nursing facility..... 0.0 %

Admitted for elective procedure..... 20.6 %

Admitted for emergency..... 35.5 %

COMORBIDITIES:

Cancer..... 6.7 %

Chronic cardiovascular disease..... 31.1 %

Chronic liver disease..... 1.6 %

Chronic renal disease..... 2.0 %

Chronic pulmonary disease..... 21.4 %

Cerebrovascular degeneration..... 4.0 %

Diabetes mellitus..... 5.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 65.8%

State 28.7%

Outside State 5.5%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 5.6 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 75

Occupancy Rate 54.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 52.3 %

Case Mix Index (CMI) 1.3264

STAFFING:

Total Number of Physicians..... 45

Percent of Physicians Board Certified Specialists..... 71.1 %

Medical Residents/Interns 0

Registered Nurses..... 96

Licensed Practical Nurses..... 11

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric No

Hospice Care Yes

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant Yes

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

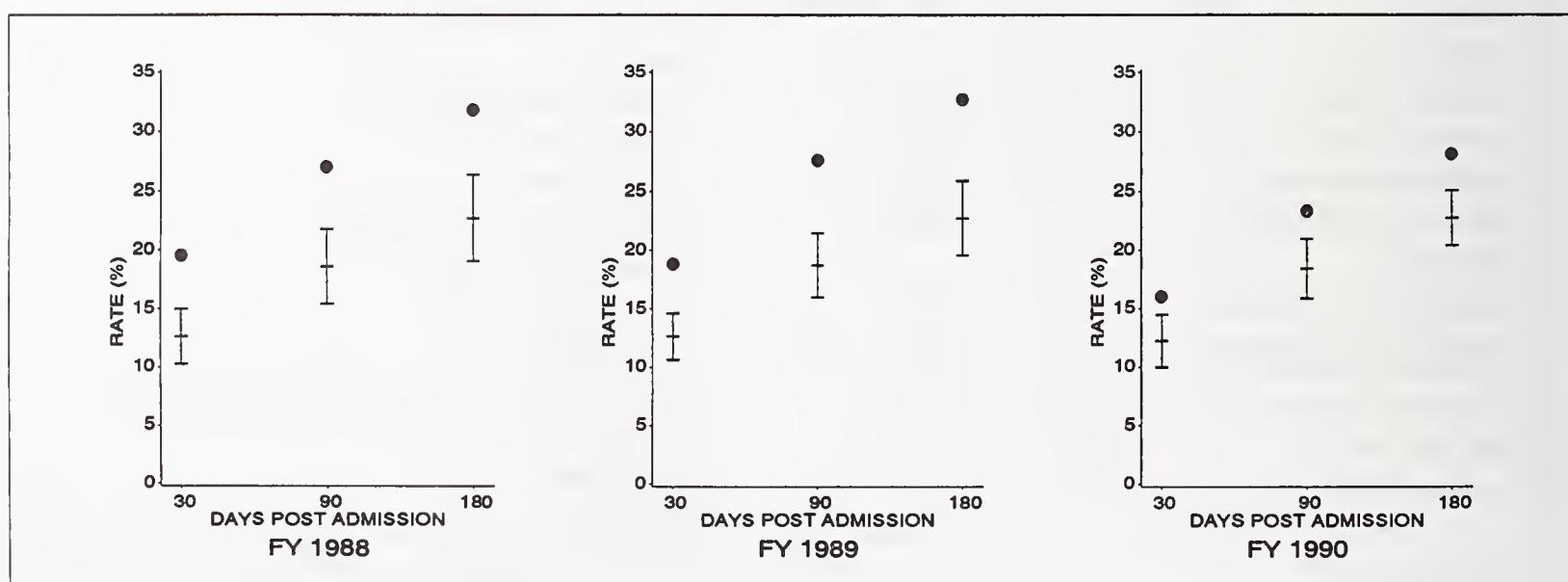
MARICOPA MEDICAL CENTER **
 2601 EAST ROOSEVELT STREET
 PHOENIX, AZ 85008
 Medicare Provider Number: 030022

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1647	16.0	12.2	1.1	23.3	18.4	1.3	28.1	22.7	1.2
CONDITIONS:										
Acute Myocardial Infarction.....	36	33.3	32.4	-----	44.4	36.2	-----	52.8	39.3	-----
Congestive Heart Failure.....	75	20.0	16.3	8.3	32.0	25.2	9.3	36.0	31.4	10.4
Pneumonia/Influenza.....	100	33.0	19.9	5.4	39.0	27.2	5.5	45.0	31.7	5.9
Chronic Obstructive Pulmonary Disease.....	52	11.5	13.4	5.4	23.1	20.6	5.8	26.9	25.6	8.1
Transient Cerebral Ischemia.....	5	20.0	1.5	-----	20.0	3.2	-----	20.0	5.2	-----
Stroke.....	31	25.8	17.9	-----	29.0	25.6	-----	41.9	30.0	-----
Hip Fracture.....	115	13.0	8.7	4.0	17.4	15.2	3.7	19.1	19.5	4.3
Sepsis.....	22	31.8	25.1	-----	40.9	32.2	-----	45.5	36.8	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	3	0.0	4.7	-----	0.0	9.8	-----	0.0	14.8	-----
Carotid Endarterectomy.....	1	0.0	1.4	-----	0.0	3.2	-----	0.0	5.1	-----
Hip Replacement/Reconstruction.....	42	9.5	9.2	-----	19.0	16.0	-----	19.0	20.6	-----
Open Reduction of Hip Fracture.....	63	11.1	6.7	5.8	14.3	12.5	5.1	17.5	16.7	5.2
Prostatectomy.....	18	0.0	1.2	-----	5.6	2.7	-----	5.6	4.4	-----
Cholecystectomy.....	16	6.3	7.9	-----	6.3	12.0	-----	12.5	14.0	-----
Hysterectomy.....	5	0.0	0.2	-----	0.0	0.4	-----	0.0	0.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



** This hospital says that it submitted inaccurate data to Medicare and that its predicted mortality rate should be higher than that presented above.

MARICOPA MEDICAL CENTER
Medicare Provider Number: 030022

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 72.7 years

Proportion female..... 59.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 1.7 %

Transferred from skilled nursing facility..... 14.2 %

Admitted for elective procedure..... 8.0 %

Admitted for emergency..... 75.2 %

COMORBIDITIES:

Cancer..... 3.9 %

Chronic cardiovascular disease..... 34.2 %

Chronic liver disease..... 1.8 %

Chronic renal disease..... 4.7 %

Chronic pulmonary disease..... 19.1 %

Cerebrovascular degeneration..... 14.2 %

Diabetes mellitus..... 14.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 92.6%

State 4.3%

Outside State 3.1%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 8.1 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 478

Occupancy Rate 74.0 %

Ownership/Control..... Local Government

Medicare Discharges 13.2 %

Case Mix Index (CMI) 1.3051

STAFFING:

Total Number of Physicians..... 398

Percent of Physicians Board Certified Specialists 74.6 %

Medical Residents/Interns 211

Registered Nurses..... 327

Licensed Practical Nurses..... 49

SPECIALTY SERVICES:

Burn Unit Yes

Cardiac Intensive Care Yes

Comprehensive Geriatric No

Hospice Care No

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care Yes

Trauma Center Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric Yes

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

MARYVALE SAMARITAN MEDICAL CENTER

5102 WEST CAMPBELL AVENUE

PHOENIX, AZ 85031

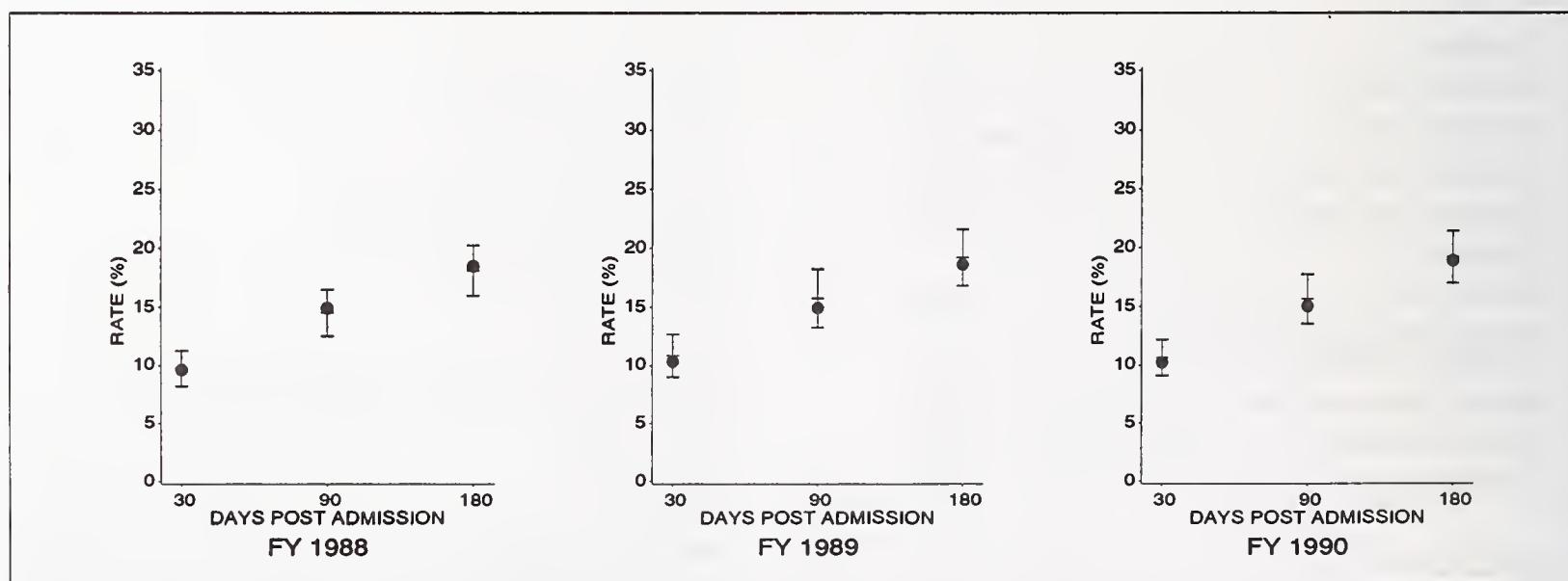
Medicare Provider Number: 030001

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1627	10.2	10.6	0.8	15.0	15.6	1.1	18.9	19.2	1.1
CONDITIONS:										
Acute Myocardial Infarction.....	65	23.1	25.5	5.5	26.2	27.9	6.0	27.7	30.1	6.0
Congestive Heart Failure.....	87	12.6	12.9	3.8	18.4	20.6	5.4	25.3	26.4	4.9
Pneumonia/Influenza.....	73	6.8	11.4	4.5	16.4	15.8	4.4	20.5	19.0	4.7
Chronic Obstructive Pulmonary Disease.....	26	0.0	5.3	-----	7.7	9.5	-----	26.9	13.1	-----
Transient Cerebral Ischemia.....	12	8.3	1.7	-----	8.3	4.1	-----	8.3	6.9	-----
Stroke.....	72	15.3	17.5	6.6	18.1	23.1	8.4	25.0	26.5	7.8
Hip Fracture.....	58	13.8	6.1	5.2	15.5	10.8	5.4	17.2	14.0	5.1
Sepsis.....	41	19.5	29.1	-----	31.7	39.5	-----	36.6	44.6	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	9	11.1	7.9	-----	11.1	14.4	-----	11.1	18.8	-----
Carotid Endarterectomy.....	7	0.0	1.0	-----	0.0	1.9	-----	0.0	2.9	-----
Hip Replacement/Reconstruction.....	39	10.3	4.0	-----	10.3	7.4	-----	10.3	9.7	-----
Open Reduction of Hip Fracture.....	28	3.6	4.9	-----	7.1	8.6	-----	7.1	11.4	-----
Prostatectomy.....	54	0.0	1.2	2.5	3.7	2.9	2.3	5.6	5.0	3.0
Cholecystectomy.....	38	2.6	3.0	-----	2.6	5.4	-----	2.6	6.9	-----
Hysterectomy.....	7	0.0	0.5	-----	0.0	1.2	-----	0.0	1.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MARYVALE SAMARITAN MEDICAL CENTER

Medicare Provider Number: 030001

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	72.9 years
Proportion female.....	55.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	35.0 %
Transferred from skilled nursing facility.....	0.1 %
Admitted for elective procedure.....	14.6 %
Admitted for emergency.....	62.9 %

COMORBIDITIES:

Cancer.....	8.0 %
Chronic cardiovascular disease.....	33.7 %
Chronic liver disease.....	1.2 %
Chronic renal disease.....	4.8 %
Chronic pulmonary disease.....	20.3 %
Cerebrovascular degeneration.....	3.6 %
Diabetes mellitus.....	11.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	86.2%
State	5.8%
Outside State	8.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.1 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	228
Occupancy Rate	48.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	24.4 %
Case Mix Index (CMI)	1.3487

STAFFING:

Total Number of Physicians.....	147
Percent of Physicians Board Certified Specialists.....	72.1 %
Medical Residents/Interns	0
Registered Nurses.....	220
Licensed Practical Nurses	11

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

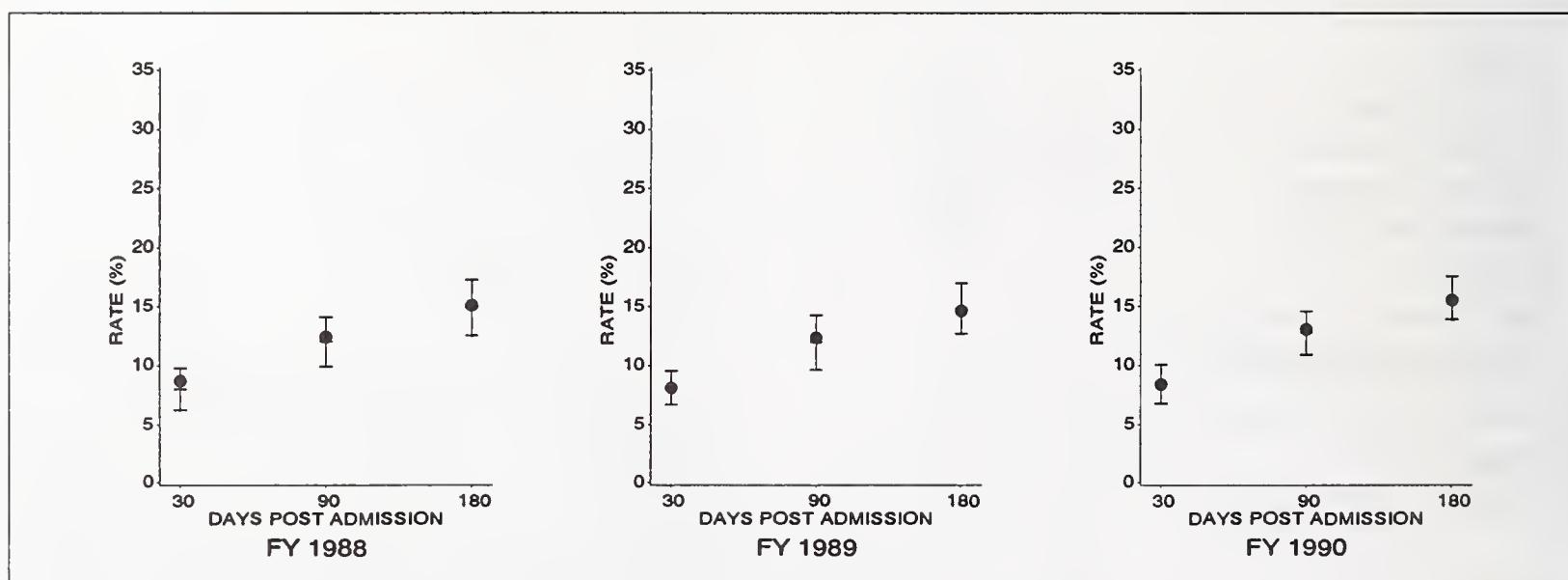
MESA GENERAL HOSPITAL MEDICAL CENTER
 515 NORTH MESA DRIVE
 MESA, AZ 85201
 Medicare Provider Number: 030017

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1712	8.4	8.4	0.8	13.0	12.7	0.9	15.5	15.7	0.9
CONDITIONS:										
Acute Myocardial Infarction.....	37	27.0	27.2	-----	27.0	29.3	-----	29.7	31.6	-----
Congestive Heart Failure.....	70	21.4	14.0	6.6	24.3	22.3	5.2	30.0	28.2	5.6
Pneumonia/Influenza.....	85	7.1	14.2	6.4	14.1	19.8	6.6	17.6	23.3	6.2
Chronic Obstructive Pulmonary Disease.....	14	7.1	9.7	-----	14.3	16.2	-----	14.3	20.9	-----
Transient Cerebral Ischemia.....	35	0.0	2.1	-----	11.4	4.8	-----	11.4	7.7	-----
Stroke.....	52	19.2	17.8	7.9	26.9	23.8	7.8	32.7	27.4	8.2
Hip Fracture.....	38	0.0	5.7	-----	5.3	10.6	-----	7.9	14.0	-----
Sepsis.....	18	27.8	22.5	-----	27.8	29.0	-----	27.8	33.1	-----
PROCEDURES:										
Angioplasty.....	26	0.0	2.6	-----	0.0	3.4	-----	0.0	4.2	-----
Coronary Artery Bypass Graft.....	31	3.2	4.7	-----	6.5	6.2	-----	6.5	6.9	-----
Initial Pacemaker Insertion.....	10	0.0	2.5	-----	0.0	5.0	-----	10.0	7.5	-----
Carotid Endarterectomy.....	22	0.0	1.7	-----	0.0	3.2	-----	4.5	4.5	-----
Hip Replacement/Reconstruction.....	27	0.0	2.3	-----	0.0	4.6	-----	0.0	6.4	-----
Open Reduction of Hip Fracture.....	24	0.0	4.4	-----	4.2	8.2	-----	8.3	11.0	-----
Prostatectomy.....	89	0.0	0.9	1.7	3.4	2.1	1.8	4.5	3.4	2.3
Cholecystectomy.....	30	0.0	2.6	-----	3.3	4.6	-----	3.3	5.9	-----
Hysterectomy.....	20	0.0	0.6	-----	0.0	1.0	-----	0.0	1.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



MESA GENERAL HOSPITAL MEDICAL CENTER
Medicare Provider Number: 030017

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission.....	72.9 years	Cancer.....	6.9 %
Proportion female.....	49.1 %	Chronic cardiovascular disease.....	29.4 %
ADMISSION SOURCES/TYPES:		Chronic liver disease.....	
Referred by personal or HMO physician.....	49.6 %	Chronic renal disease.....	2.6 %
Transferred from skilled nursing facility.....	0.0 %	Chronic pulmonary disease.....	20.3 %
Admitted for elective procedure.....	19.2 %	Cerebrovascular degeneration.....	4.0 %
Admitted for emergency.....	57.9 %	Diabetes mellitus.....	5.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:		MEDICARE AVERAGE LENGTH OF STAY:	
County/City	68.2%	Hospital	6.1 Days
State	14.6%	State	6.8 Days
Outside State	17.2%	National	8.6 Days
Total	100.0%		

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	
Total Beds	145
Occupancy Rate	46.0 %
Ownership/Control.....	Private, For Profit
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.3567
STAFFING:	
Total Number of Physicians.....	199
Percent of Physicians Board Certified Specialists.....	68.8 %
Medical Residents/Interns	8
Registered Nurses.....	128
Licensed Practical Nurses	5
SPECIALTY SERVICES:	
Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes
OTHER SPECIALTY/HOSPITAL-BASED SERVICES:	
Alcohol/Drug.....	Yes
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

MESA LUTHERAN HOSPITAL

525 WEST BROWN ROAD
MESA, AZ 85201

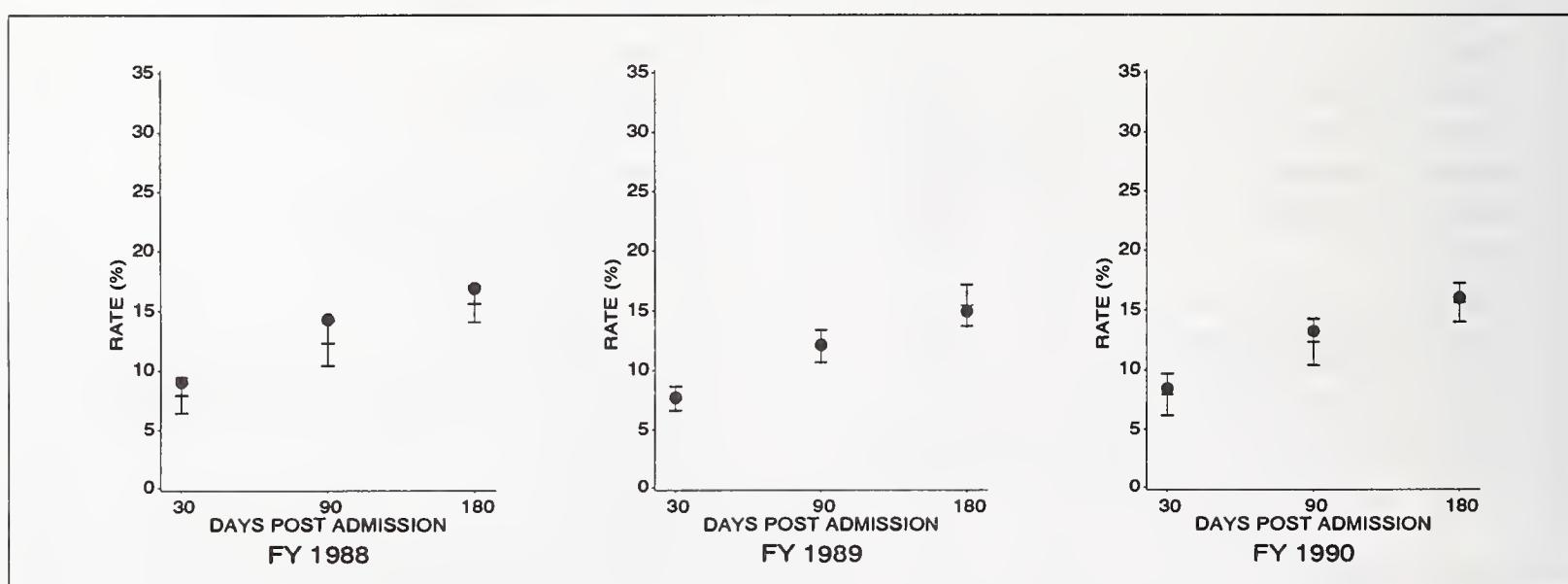
Medicare Provider Number: 030018

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	2830	8.4	7.9	0.9	13.2	12.3	1.0	16.0	15.6	0.8
CONDITIONS:										
Acute Myocardial Infarction.....	78	24.4	22.5	5.4	26.9	25.7	5.9	30.8	28.3	6.4
Congestive Heart Failure.....	125	12.8	13.9	3.2	20.8	22.2	4.1	27.2	28.1	4.5
Pneumonia/Influenza.....	138	15.2	16.0	4.5	23.9	22.1	3.7	28.3	26.1	4.1
Chronic Obstructive Pulmonary Disease.....	34	5.9	5.8	-----	8.8	10.7	-----	14.7	14.9	-----
Transient Cerebral Ischemia.....	36	2.8	1.2	-----	5.6	2.8	-----	5.6	4.5	-----
Stroke.....	97	16.5	18.5	6.3	26.8	24.9	4.9	27.8	28.5	4.6
Hip Fracture.....	67	10.4	6.7	6.6	14.9	11.5	7.7	17.9	14.8	6.8
Sepsis.....	20	25.0	23.0	-----	35.0	33.3	-----	40.0	38.5	-----
PROCEDURES:										
Angioplasty.....	29	3.4	1.5	-----	3.4	2.4	-----	3.4	3.5	-----
Coronary Artery Bypass Graft.....	102	6.9	4.9	2.7	6.9	7.2	2.6	7.8	8.1	2.8
Initial Pacemaker Insertion.....	21	0.0	3.1	-----	0.0	6.2	-----	4.8	9.1	-----
Carotid Endarterectomy.....	26	0.0	1.5	-----	0.0	2.8	-----	0.0	4.1	-----
Hip Replacement/Reconstruction.....	57	3.5	3.2	4.8	7.0	5.8	6.1	8.8	7.7	5.9
Open Reduction of Hip Fracture.....	36	11.1	6.3	-----	16.7	11.1	-----	19.4	14.5	-----
Prostatectomy.....	104	1.0	0.9	1.5	2.9	2.0	1.5	3.8	3.4	1.8
Cholecystectomy.....	73	4.1	2.8	3.5	9.6	5.2	5.2	9.6	7.1	5.2
Hysterectomy.....	33	0.0	0.5	-----	0.0	1.2	-----	0.0	2.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MESA LUTHERAN HOSPITAL
Medicare Provider Number: 030018

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 74.4 years

Proportion female..... 51.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 57.2 %

Transferred from skilled nursing facility..... 0.1 %

Admitted for elective procedure..... 55.3 %

Admitted for emergency..... 36.1 %

COMORBIDITIES:

Cancer..... 8.4 %

Chronic cardiovascular disease..... 44.2 %

Chronic liver disease..... 0.4 %

Chronic renal disease..... 2.9 %

Chronic pulmonary disease..... 18.8 %

Cerebrovascular degeneration..... 1.9 %

Diabetes mellitus..... 7.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 73.2%

State 10.2%

Outside State 16.6%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 6.9 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 273

Occupancy Rate 62.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 44.4 %

Case Mix Index (CMI) 1.5545

STAFFING:

Total Number of Physicians..... 262

Percent of Physicians Board Certified Specialists 78.2 %

Medical Residents/Interns 0

Registered Nurses..... 266

Licensed Practical Nurses 27

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric No

Hospice Care No

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation Yes

Psychiatric No

Medicare Swing Beds Yes

** Except for CMI

* Not used in calculating mortality rates

MIAMI-INSPIRATION HOSPITAL

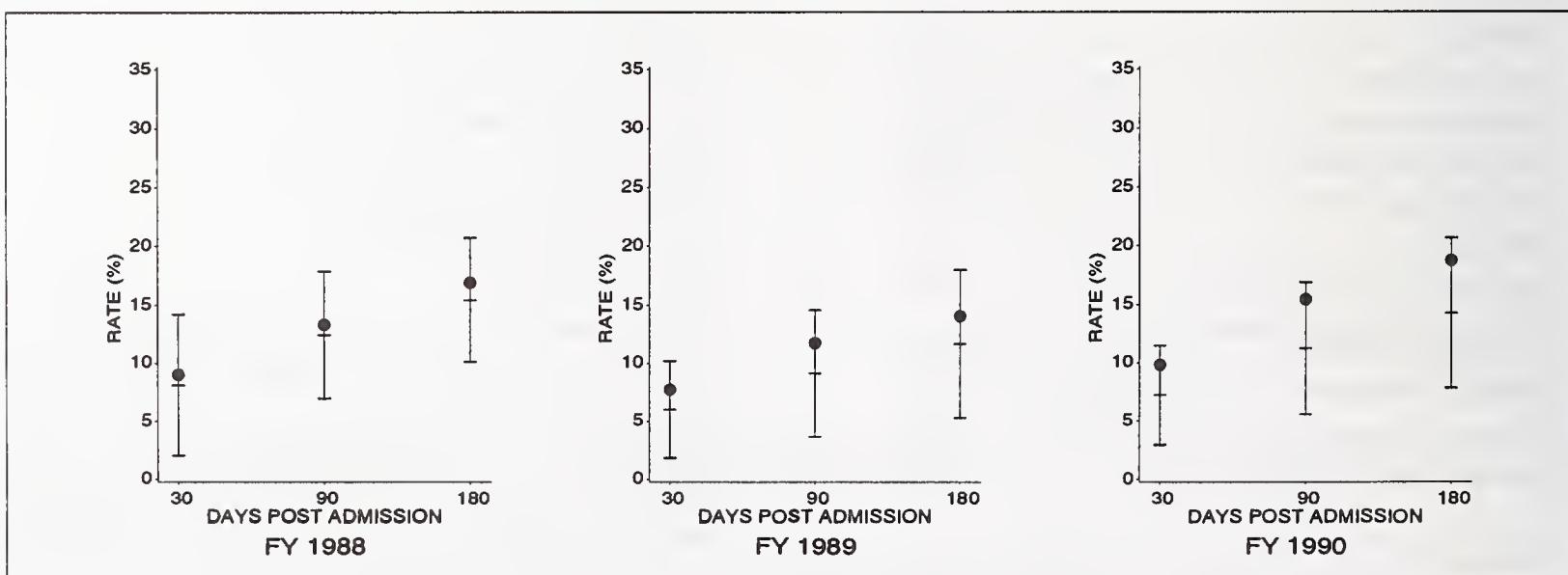
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MIAMI, AZ 85539
Medicare Provider Number: 030060

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	305	9.8	7.2	2.1	15.4	11.2	2.8	18.7	14.2	3.2
CONDITIONS:										
Acute Myocardial Infarction.....	13	30.8	23.8	-----	30.8	26.3	-----	30.8	29.0	-----
Congestive Heart Failure.....	25	32.0	13.3	-----	44.0	21.8	-----	52.0	27.9	-----
Pneumonia/Influenza.....	15	0.0	11.0	-----	0.0	15.4	-----	0.0	18.4	-----
Chronic Obstructive Pulmonary Disease.....	10	10.0	9.1	-----	30.0	16.5	-----	30.0	21.8	-----
Transient Cerebral Ischemia.....	5	20.0	1.5	-----	20.0	3.4	-----	20.0	5.4	-----
Stroke.....	6	33.3	22.3	-----	33.3	28.9	-----	33.3	32.0	-----
Hip Fracture.....	7	0.0	4.3	-----	14.3	8.2	-----	14.3	11.4	-----
Sepsis.....	2	0.0	19.0	-----	0.0	30.2	-----	0.0	35.2	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	8	0.0	1.1	-----	0.0	2.2	-----	0.0	3.2	-----
Open Reduction of Hip Fracture.....	2	0.0	7.4	-----	50.0	14.0	-----	50.0	19.4	-----
Prostatectomy.....	11	0.0	0.8	-----	0.0	1.8	-----	0.0	3.1	-----
Cholecystectomy.....	6	0.0	2.3	-----	0.0	3.7	-----	0.0	4.5	-----
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MIAMI-INSPIRATION HOSPITAL
Medicare Provider Number: 030060

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	74.5 years
Proportion female.....	49.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	97.0 %
Transferred from skilled nursing facility.....	0.3 %
Admitted for elective procedure.....	19.7 %
Admitted for emergency.....	12.1 %

COMORBIDITIES:

Cancer.....	8.9 %
Chronic cardiovascular disease.....	30.2 %
Chronic liver disease.....	3.0 %
Chronic renal disease.....	1.0 %
Chronic pulmonary disease.....	9.5 %
Cerebrovascular degeneration.....	1.3 %
Diabetes mellitus.....	10.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	89.2%
State	8.0%
Outside State	2.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.0 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	49
Occupancy Rate	26.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	46.6 %
Case Mix Index (CMI)	1.0770

STAFFING:

Total Number of Physicians.....	22
Percent of Physicians Board Certified Specialists.....	40.9 %
Medical Residents/Interns	0
Registered Nurses.....	22
Licensed Practical Nurses.....	6

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

MT GRAHAM COMMUNITY HOSPITAL

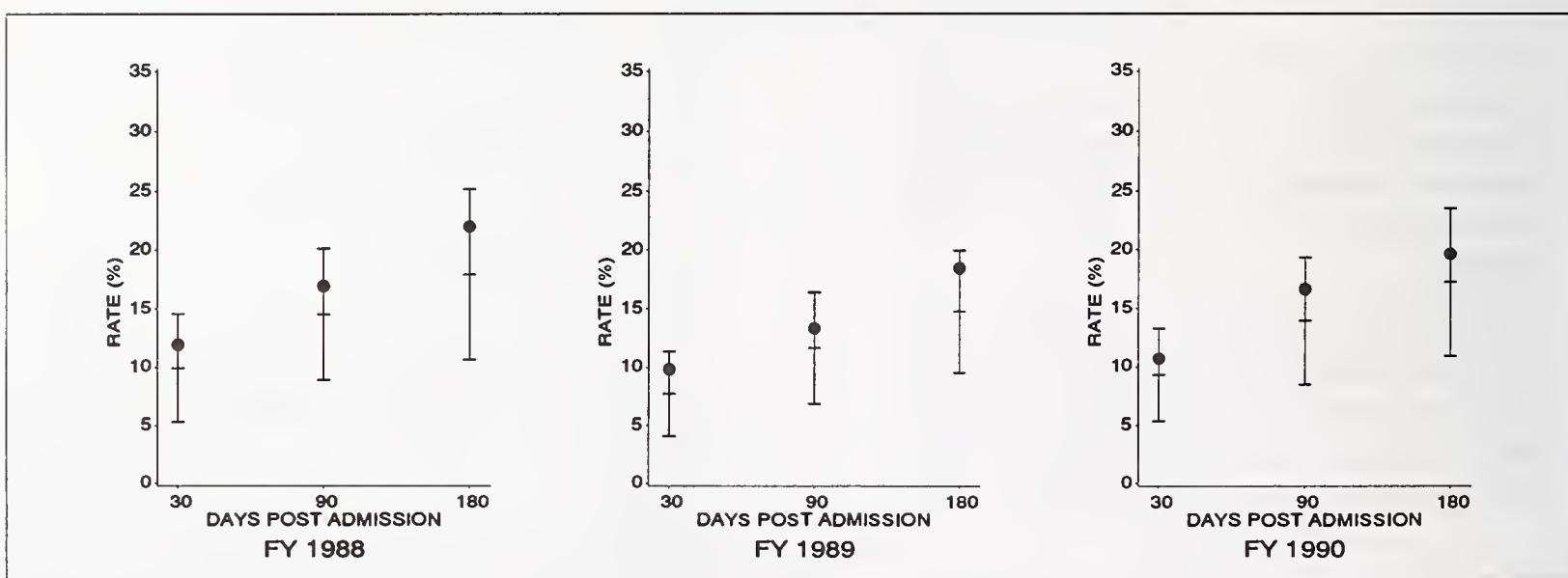
1600 20TH AVE
SAFFORD, AZ 85546
Medicare Provider Number: 030068

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	373	10.7	9.3	2.0	16.6	13.9	2.7	19.6	17.2	3.2
CONDITIONS:										
Acute Myocardial Infarction.....	14	28.6	22.5	-----	28.6	25.5	-----	42.9	28.1	-----
Congestive Heart Failure.....	18	33.3	13.6	-----	44.4	21.8	-----	44.4	28.1	-----
Pneumonia/Influenza.....	43	11.6	14.5	-----	20.9	19.6	-----	23.3	23.1	-----
Chronic Obstructive Pulmonary Disease.....	10	20.0	5.9	-----	20.0	11.4	-----	30.0	16.0	-----
Transient Cerebral Ischemia.....	5	0.0	0.8	-----	0.0	1.9	-----	0.0	3.1	-----
Stroke.....	25	36.0	21.7	-----	36.0	29.2	-----	40.0	33.6	-----
Hip Fracture.....	9	0.0	8.0	-----	11.1	14.2	-----	11.1	17.9	-----
Sepsis.....	4	0.0	20.8	-----	25.0	29.5	-----	25.0	33.3	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	3	0.0	3.4	-----	33.3	6.7	-----	33.3	9.7	-----
Open Reduction of Hip Fracture.....	4	0.0	3.5	-----	0.0	6.2	-----	0.0	8.6	-----
Prostatectomy.....	0									
Cholecystectomy.....	3	0.0	0.7	-----	0.0	1.2	-----	0.0	1.7	-----
Hysterectomy.....	7	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



MT GRAHAM COMMUNITY HOSPITAL
Medicare Provider Number: 030068

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 75.0 years

Proportion female..... 54.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 49.1 %

Transferred from skilled nursing facility..... 0.0 %

Admitted for elective procedure..... 1.1 %

Admitted for emergency..... 50.4 %

COMORBIDITIES:

Cancer..... 5.1 %

Chronic cardiovascular disease..... 31.4 %

Chronic liver disease..... 1.1 %

Chronic renal disease..... 2.4 %

Chronic pulmonary disease..... 15.0 %

Cerebrovascular degeneration..... 2.9 %

Diabetes mellitus..... 14.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 74.8%

State 20.0%

Outside State 5.2%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 4.0 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 36

Occupancy Rate 50.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 28.8 %

Case Mix Index (CMI) 1.0042

STAFFING:

Total Number of Physicians..... 11

Percent of Physicians Board Certified Specialists..... 45.5 %

Medical Residents/Interns 0

Registered Nurses..... 24

Licensed Practical Nurses..... 7

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric No

Hospice Care No

Medical/Surgical Intensive Care No

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds Yes

** Except for CMI

* Not used in calculating mortality rates

NAVAPACHE HOSPITAL

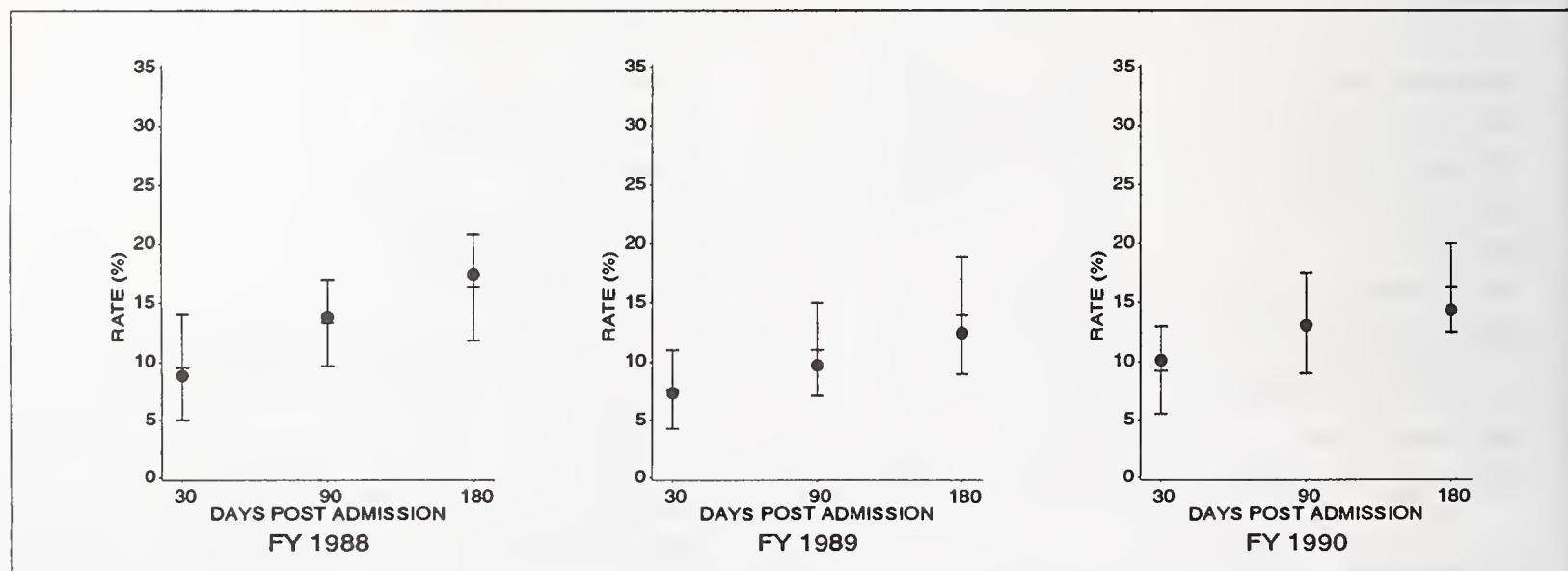
2200 SHOW LOW LAKE ROAD
SHOW LOW, AZ 85901
Medicare Provider Number: 030062

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	524	10.1	9.2	1.9	13.0	13.2	2.1	14.3	16.2	1.9
CONDITIONS:										
Acute Myocardial Infarction.....	22	27.3	27.1	-----	31.8	29.4	-----	31.8	31.9	-----
Congestive Heart Failure.....	20	10.0	12.8	-----	15.0	20.3	-----	20.0	26.5	-----
Pneumonia/Influenza.....	29	10.3	13.6	-----	13.8	18.2	-----	20.7	21.7	-----
Chronic Obstructive Pulmonary Disease.....	6	0.0	9.0	-----	16.7	16.6	-----	16.7	22.6	-----
Transient Cerebral Ischemia.....	4	0.0	1.7	-----	0.0	4.1	-----	0.0	7.1	-----
Stroke.....	17	35.3	21.3	-----	35.3	29.5	-----	35.3	33.8	-----
Hip Fracture.....	28	17.9	8.8	-----	21.4	15.4	-----	21.4	19.7	-----
Sepsis.....	6	33.3	22.0	-----	33.3	26.3	-----	33.3	30.1	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	9	0.0	6.6	-----	11.1	10.5	-----	11.1	13.7	-----
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	20	20.0	6.3	-----	25.0	11.2	-----	25.0	14.6	-----
Open Reduction of Hip Fracture.....	9	11.1	9.8	-----	11.1	18.3	-----	11.1	23.4	-----
Prostatectomy.....	0									
Cholecystectomy.....	13	7.7	1.7	-----	7.7	2.9	-----	7.7	3.7	-----
Hysterectomy.....	1	0.0	0.3	-----	0.0	0.6	-----	0.0	1.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NAVAPACHE HOSPITAL
Medicare Provider Number: 030062

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 73.5 years

Proportion female..... 53.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 26.5 %

Transferred from skilled nursing facility..... 0.0 %

Admitted for elective procedure..... 0.0 %

Admitted for emergency..... 94.1 %

COMORBIDITIES:

Cancer..... 4.4 %

Chronic cardiovascular disease..... 40.5 %

Chronic liver disease..... 1.1 %

Chronic renal disease..... 3.8 %

Chronic pulmonary disease..... 18.9 %

Cerebrovascular degeneration..... 3.6 %

Diabetes mellitus..... 7.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 62.5%

State 33.2%

Outside State 4.3%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 5.1 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 49

Occupancy Rate 51.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 35.1 %

Case Mix Index (CMI) 1.2824

STAFFING:

Total Number of Physicians..... 24

Percent of Physicians Board Certified Specialists 75.0 %

Medical Residents/Interns 0

Registered Nurses..... 54

Licensed Practical Nurses 5

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric No

Hospice Care No

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

NORTHERN COCHISE COMMUNITY HOSPITAL

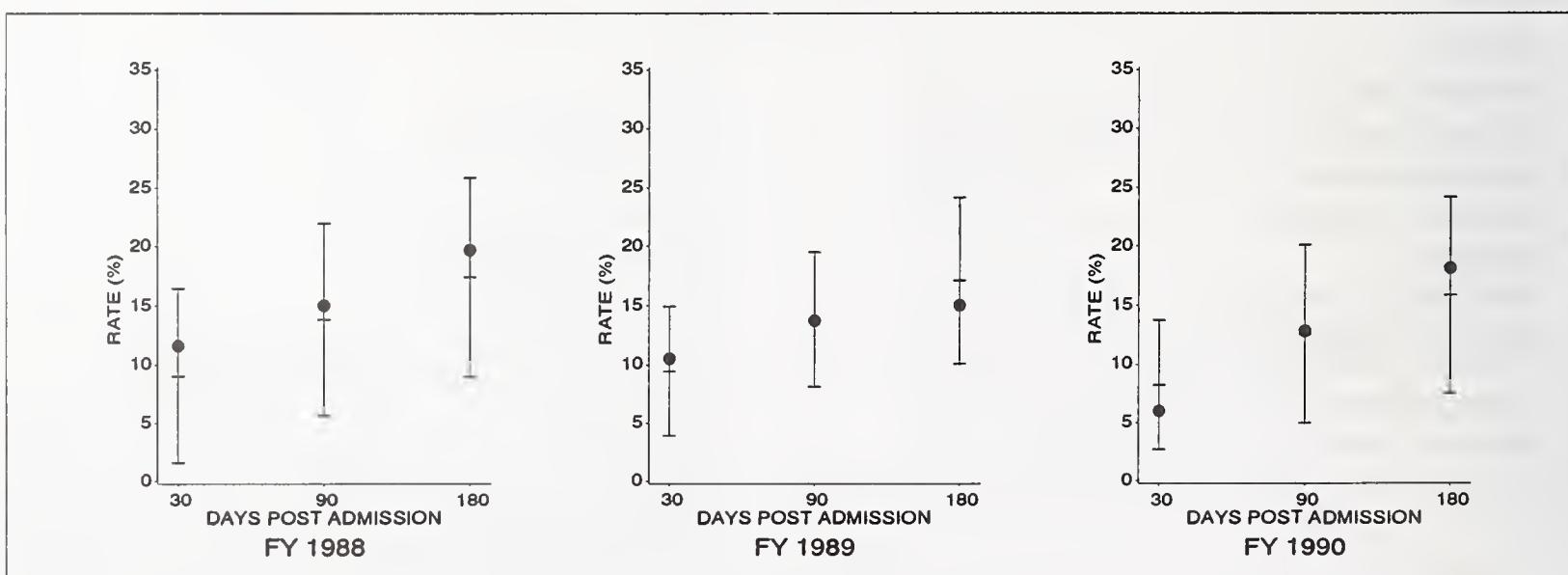
901 WEST REX ALLEN DRIVE
WILLCOX, AZ 85643
Medicare Provider Number: 030041

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	149	6.0	8.2	2.8	12.8	12.5	3.8	18.1	15.8	4.2
CONDITIONS:										
Acute Myocardial Infarction.....	3	0.0	33.5	-----	66.7	36.2	-----	66.7	39.5	-----
Congestive Heart Failure.....	7	14.3	15.1	-----	28.6	24.7	-----	57.1	32.3	-----
Pneumonia/Influenza.....	14	7.1	13.0	-----	7.1	17.7	-----	14.3	20.4	-----
Chronic Obstructive Pulmonary Disease.....	9	11.1	7.4	-----	22.2	12.3	-----	22.2	16.3	-----
Transient Cerebral Ischemia.....	4	0.0	4.5	-----	0.0	10.0	-----	25.0	15.6	-----
Stroke.....	4	50.0	18.2	-----	50.0	23.0	-----	50.0	26.7	-----
Hip Fracture.....	0									
Sepsis.....	0									
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	0									
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NORTHERN COCHISE COMMUNITY HOSPITAL

Medicare Provider Number: 030041

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	74.5 years
Proportion female.....	53.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	96.6 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	0.0 %
Admitted for emergency.....	96.6 %

COMORBIDITIES:

Cancer.....	2.0 %
Chronic cardiovascular disease.....	33.6 %
Chronic liver disease.....	1.3 %
Chronic renal disease.....	1.3 %
Chronic pulmonary disease.....	10.7 %
Cerebrovascular degeneration.....	4.7 %
Diabetes mellitus.....	6.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City.....	84.5%
State	4.4%
Outside State	11.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	3.8 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1990

PROFILE:

Total Beds	24
Ownership/Control.....	District/Authority
Case Mix Index (CMI)	0.8996

STAFFING:

Medical Residents/Interns	0
Registered Nurses.....	14
Licensed Practical Nurses	2

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	No
Hospice Care	No
Intensive Care Unit	No
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric.....	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

NORTHWEST HOSPITAL

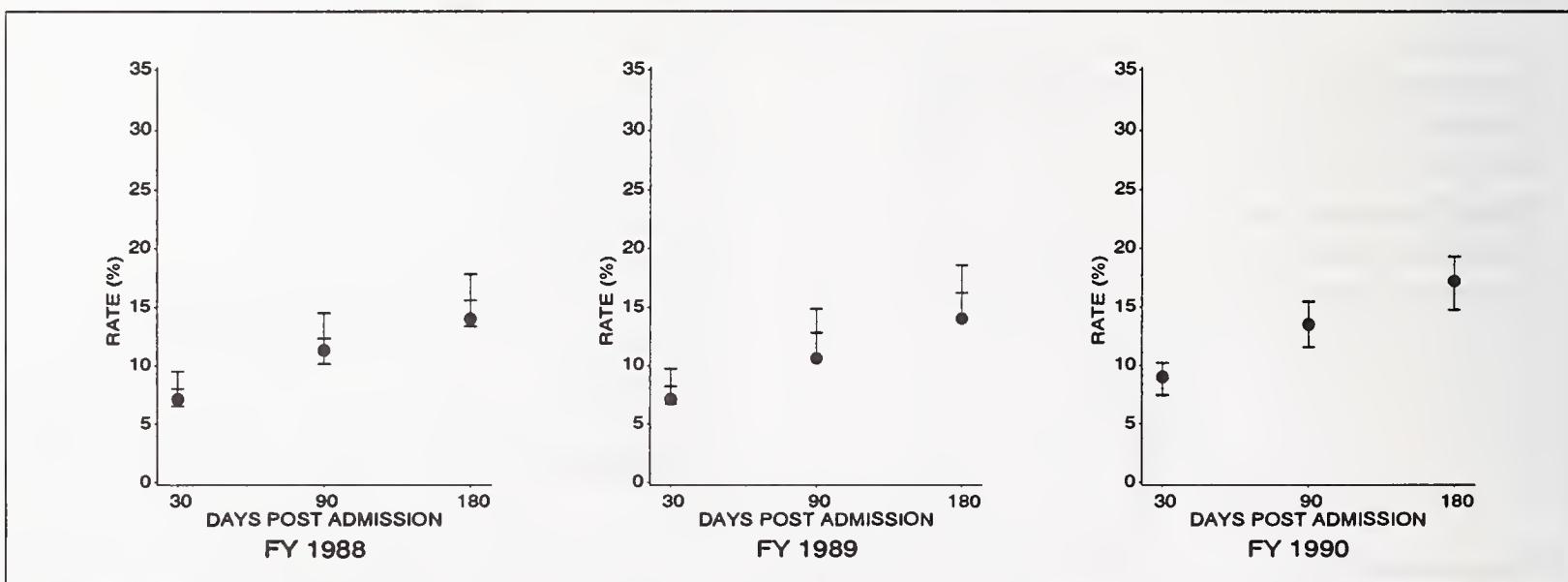
6200 N LA CHOLLA BLVD
TUCSON, AZ 85741
Medicare Provider Number: 030085

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1812	9.0	8.8	0.7	13.5	13.5	1.0	17.2	17.0	1.1
CONDITIONS:										
Acute Myocardial Infarction.....	32	34.4	29.4	-----	40.6	33.1	-----	46.9	36.2	-----
Congestive Heart Failure.....	71	16.9	13.7	4.9	22.5	22.0	6.1	33.8	28.3	8.4
Pneumonia/Influenza.....	104	13.5	14.3	3.9	18.3	20.0	6.1	22.1	23.6	6.3
Chronic Obstructive Pulmonary Disease.....	54	16.7	7.6	6.3	24.1	13.6	6.7	27.8	18.2	7.1
Transient Cerebral Ischemia.....	11	9.1	1.3	-----	9.1	2.8	-----	9.1	4.7	-----
Stroke.....	70	12.9	20.9	6.5	22.9	27.0	5.9	22.9	30.9	6.8
Hip Fracture.....	61	3.3	5.8	3.8	6.6	10.5	5.2	13.1	13.8	4.6
Sepsis.....	16	12.5	30.5	-----	18.8	38.6	-----	18.8	43.8	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	12	0.0	4.6	-----	0.0	7.4	-----	0.0	9.8	-----
Carotid Endarterectomy.....	11	9.1	1.3	-----	9.1	2.5	-----	9.1	4.0	-----
Hip Replacement/Reconstruction.....	38	2.6	2.9	-----	5.3	5.6	-----	10.5	7.7	-----
Open Reduction of Hip Fracture.....	34	0.0	5.7	-----	5.9	10.6	-----	8.8	14.0	-----
Prostatectomy.....	88	0.0	1.0	1.4	1.1	2.2	1.8	2.3	3.6	2.3
Cholecystectomy.....	43	0.0	2.0	-----	2.3	3.7	-----	2.3	5.0	-----
Hysterectomy.....	17	0.0	0.6	-----	0.0	1.4	-----	5.9	2.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



NORTHWEST HOSPITAL
Medicare Provider Number: 030085

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 75.6 years
Proportion female..... 54.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 58.2 %
Transferred from skilled nursing facility..... 0.0 %
Admitted for elective procedure..... 26.2 %
Admitted for emergency..... 60.5 %

COMORBIDITIES:

Cancer.....	9.0 %
Chronic cardiovascular disease.....	26.7 %
Chronic liver disease.....	1.5 %
Chronic renal disease.....	1.3 %
Chronic pulmonary disease.....	18.2 %
Cerebrovascular degeneration.....	4.0 %
Diabetes mellitus.....	5.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	83.4%
State	7.6%
Outside State	9.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.7 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	125
Occupancy Rate	51.0 %
Ownership/Control.....	Private, For Profit
Medicare Discharges	57.0 %
Case Mix Index (CMI)	1.2994

STAFFING:

Total Number of Physicians.....	132
Percent of Physicians Board Certified Specialists	73.5 %
Medical Residents/Interns	0
Registered Nurses.....	153
Licensed Practical Nurses.....	32

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

OMNI REGIONAL MEDICAL CENTER

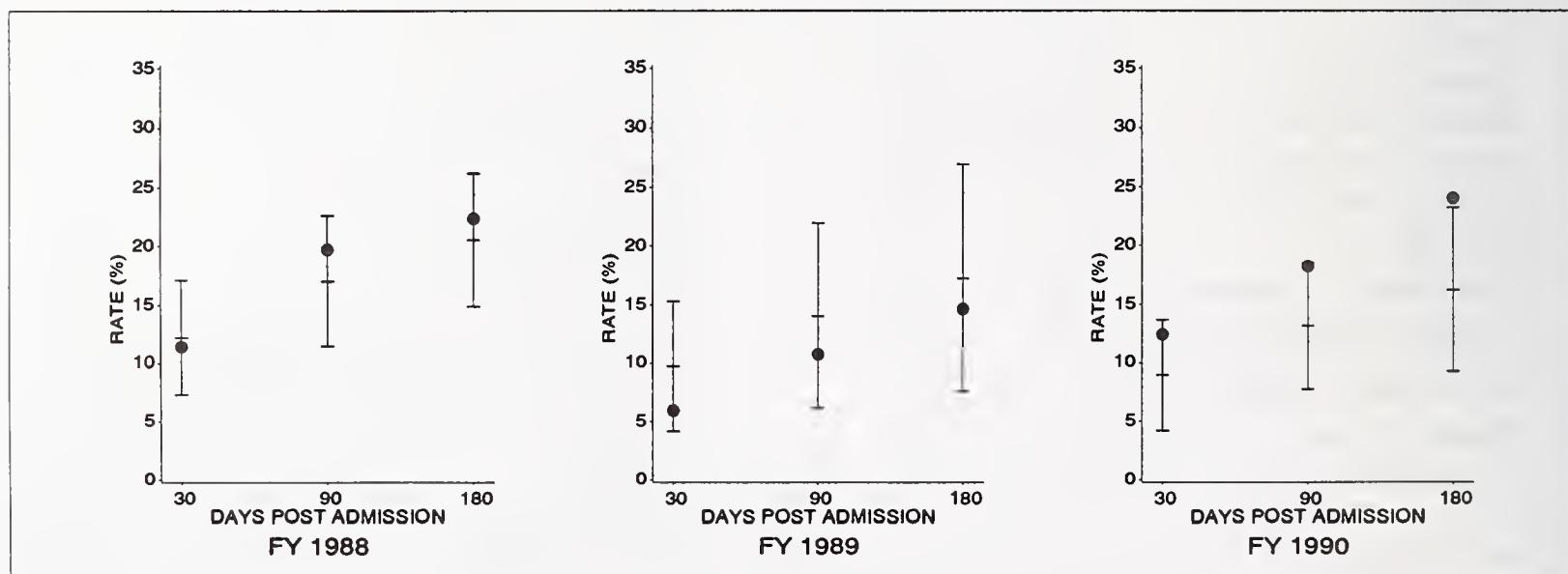
1100 MONROE ST
GLOBE, AZ 85501
Medicare Provider Number: 030051

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	225	12.4	8.9	2.4	18.2	13.1	2.7	24.0	16.2	3.5
CONDITIONS:										
Acute Myocardial Infarction.....	9	22.2	32.3	-----	22.2	34.7	-----	33.3	37.3	-----
Congestive Heart Failure.....	12	25.0	12.9	-----	25.0	19.7	-----	33.3	25.0	-----
Pneumonia/Influenza.....	18	33.3	12.5	-----	38.9	16.9	-----	44.4	19.6	-----
Chronic Obstructive Pulmonary Disease.....	11	9.1	8.4	-----	9.1	14.4	-----	27.3	18.8	-----
Transient Cerebral Ischemia.....	5	0.0	1.3	-----	0.0	2.8	-----	0.0	4.6	-----
Stroke.....	5	40.0	20.9	-----	40.0	25.1	-----	60.0	28.8	-----
Hip Fracture.....	11	9.1	6.2	-----	18.2	10.8	-----	27.3	13.9	-----
Sepsis.....	3	33.3	43.3	-----	33.3	51.2	-----	33.3	54.0	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	8	0.0	4.4	-----	12.5	8.2	-----	25.0	10.9	-----
Open Reduction of Hip Fracture.....	3	33.3	8.3	-----	33.3	14.4	-----	33.3	18.0	-----
Prostatectomy.....	0									
Cholecystectomy.....	4	25.0	3.5	-----	25.0	6.4	-----	25.0	8.3	-----
Hysterectomy.....	1	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



OMNI REGIONAL MEDICAL CENTER
Medicare Provider Number: 030051

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 76.0 years

Proportion female..... 63.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 0.0 %

Transferred from skilled nursing facility..... 0.4 %

Admitted for elective procedure..... 0.0 %

Admitted for emergency..... 0.4 %

COMORBIDITIES:

Cancer..... 1.8 %

Chronic cardiovascular disease..... 32.9 %

Chronic liver disease..... 0.9 %

Chronic renal disease..... 2.7 %

Chronic pulmonary disease..... 9.3 %

Cerebrovascular degeneration..... 1.8 %

Diabetes mellitus..... 8.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 84.0%

State 13.3%

Outside State 2.7%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 6.0 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1991

PROFILE:

Total Beds 74

Ownership/Control..... Local Government

Case Mix Index (CMI) 1.1159

STAFFING:

Medical Residents/Interns 0

Registered Nurses..... 18

Licensed Practical Nurses 6

SPECIALTY SERVICES:

Burn Unit No

Coronary Care Unit Yes

Hospice Care No

Intensive Care Unit Yes

Organ Transplant No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation Yes

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

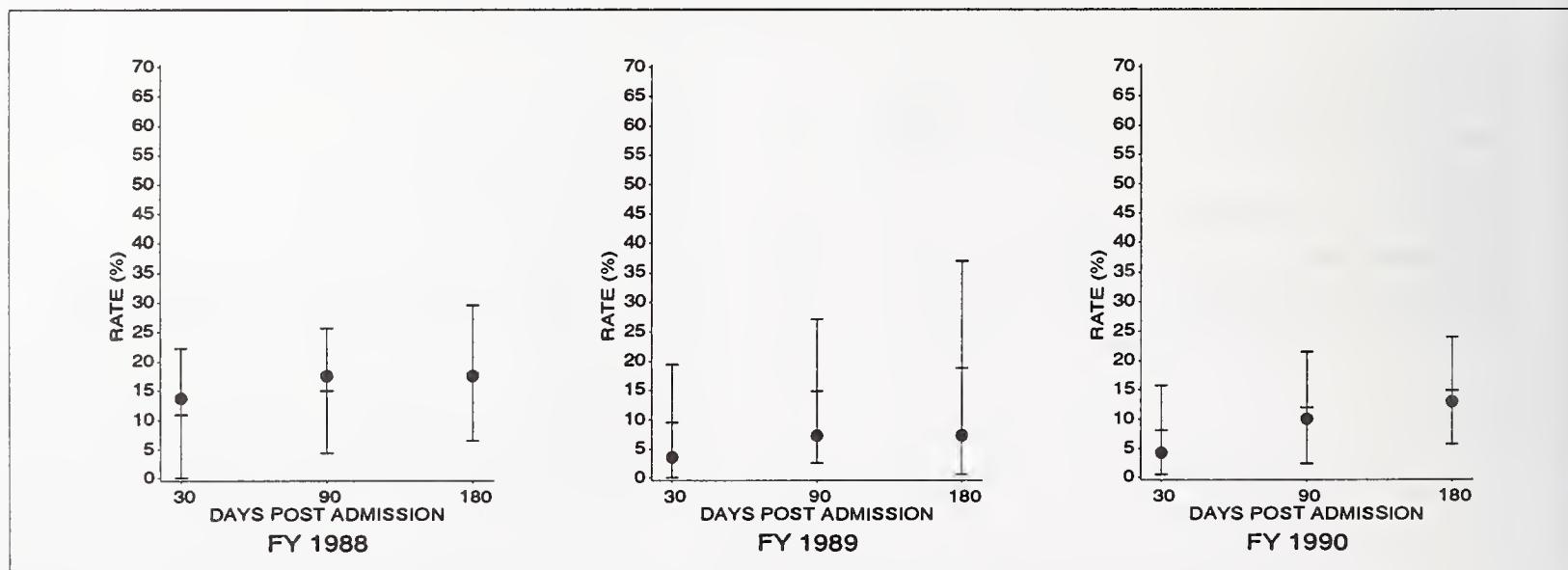
PAGE HOSPITAL
 NORTH NAVAJO DR & VISTA AVE BOX 1447
 PAGE, AZ 86040
 Medicare Provider Number: 030047

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	70	4.3	8.1	3.8	10.0	11.9	4.8	12.9	14.8	4.5
CONDITIONS:										
Acute Myocardial Infarction.....	1	0.0	16.0	-----	0.0	17.2	-----	0.0	18.8	-----
Congestive Heart Failure.....	5	40.0	14.0	-----	60.0	23.9	-----	60.0	29.8	-----
Pneumonia/Influenza.....	5	0.0	17.2	-----	0.0	23.8	-----	20.0	27.3	-----
Chronic Obstructive Pulmonary Disease.....	1	0.0	2.0	-----	0.0	4.0	-----	0.0	6.0	-----
Transient Cerebral Ischemia.....	0									
Stroke.....	1	0.0	15.0	-----	0.0	18.3	-----	0.0	21.3	-----
Hip Fracture.....	0									
Sepsis.....	0									
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	3	0.0	1.5	-----	0.0	2.6	-----	0.0	3.2	-----
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



PAGE HOSPITAL
Medicare Provider Number: 030047

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 72.2 years
Proportion female..... 58.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 44.3 %
Transferred from skilled nursing facility..... 0.0 %
Admitted for elective procedure..... 0.0 %
Admitted for emergency..... 98.6 %

COMORBIDITIES:

Cancer.....	2.9 %
Chronic cardiovascular disease.....	22.9 %
Chronic liver disease.....	0.0 %
Chronic renal disease.....	1.4 %
Chronic pulmonary disease.....	12.9 %
Cerebrovascular degeneration.....	2.9 %
Diabetes mellitus.....	7.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City.....	72.7%
State	2.5%
Outside State	24.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.1 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	25
Occupancy Rate	20.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	16.6 %
Case Mix Index (CMI)	0.9379

STAFFING:

Total Number of Physicians.....	7
Percent of Physicians Board Certified Specialists	42.9 %
Medical Residents/Interns	0
Registered Nurses.....	16
Licensed Practical Nurses	2

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No
OTHER SPECIALTY/HOSPITAL-BASED SERVICES:	
Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

PARKER COMMUNITY HOSPITAL

1149 MOHAVE ROAD P O BOX 1149

PARKER, AZ 85344

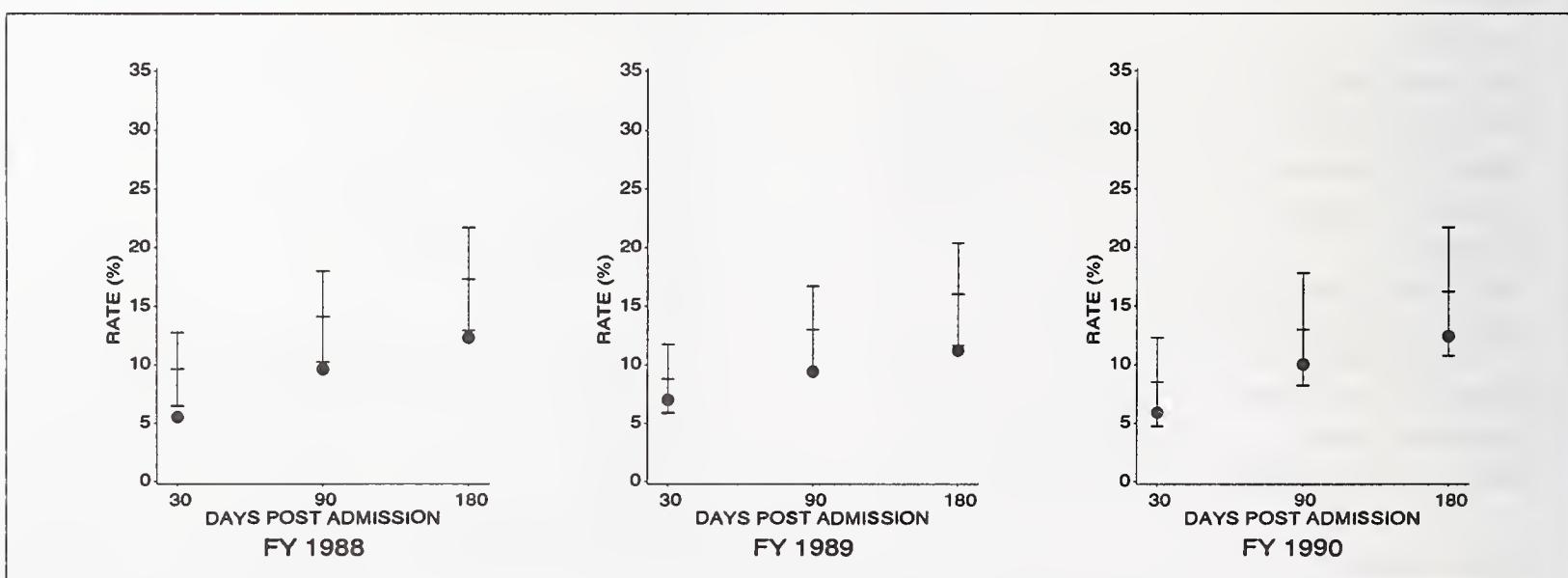
Medicare Provider Number: 030067

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	461	5.9	8.5	1.9	10.0	13.0	2.4	12.4	16.2	2.7
CONDITIONS:										
Acute Myocardial Infarction.....	6	0.0	17.1	-----	0.0	20.0	-----	16.7	22.6	-----
Congestive Heart Failure.....	23	4.3	13.2	-----	13.0	20.8	-----	21.7	26.5	-----
Pneumonia/Influenza.....	26	7.7	12.0	-----	11.5	16.7	-----	15.4	19.8	-----
Chronic Obstructive Pulmonary Disease.....	20	0.0	9.9	-----	5.0	16.3	-----	15.0	20.6	-----
Transient Cerebral Ischemia.....	12	0.0	1.7	-----	0.0	3.9	-----	0.0	6.1	-----
Stroke.....	12	0.0	12.6	-----	0.0	18.1	-----	8.3	21.8	-----
Hip Fracture.....	5	20.0	8.5	-----	20.0	15.9	-----	20.0	20.4	-----
Sepsis.....	1	0.0	6.9	-----	0.0	10.3	-----	0.0	12.7	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	4	0.0	3.7	-----	0.0	8.4	-----	0.0	12.8	-----
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	1	0.0	0.5	-----	0.0	0.9	-----	0.0	1.4	-----
Open Reduction of Hip Fracture.....	4	25.0	6.9	-----	25.0	14.0	-----	25.0	19.1	-----
Prostatectomy.....	0									
Cholecystectomy.....	11	0.0	1.5	-----	9.1	2.7	-----	9.1	3.5	-----
Hysterectomy.....	1	0.0	0.1	-----	0.0	0.3	-----	0.0	0.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



PARKER COMMUNITY HOSPITAL
Medicare Provider Number: 030067

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	73.1 years
Proportion female.....	51.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	0.4 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	0.0 %
Admitted for emergency.....	50.5 %

COMORBIDITIES:

Cancer.....	2.8 %
Chronic cardiovascular disease.....	40.6 %
Chronic liver disease.....	1.1 %
Chronic renal disease.....	1.1 %
Chronic pulmonary disease.....	51.2 %
Cerebrovascular degeneration.....	2.6 %
Diabetes mellitus.....	2.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	5.6%
State	40.9%
Outside State	53.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.3 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	39
Occupancy Rate	41.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	59.1 %
Case Mix Index (CMI)	1.0530

STAFFING:

Total Number of Physicians.....	8
Percent of Physicians Board Certified Specialists	100.0 %
Medical Residents/Interns	0
Registered Nurses.....	20
Licensed Practical Nurses	5

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

PARKER PHS INDIAN HOSPITAL

RT 1 BOX 12
PARKER, AZ 85344
Medicare Provider Number: 030079

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	24	4.2	5.4	.....	12.5	8.8	.....	20.8	11.9	.....
CONDITIONS:										
Acute Myocardial Infarction.....	1	0.0	20.9	.....	0.0	23.6	.....	0.0	25.6	.....
Congestive Heart Failure.....	2	0.0	7.1	.....	0.0	11.9	.....	50.0	16.7	.....
Pneumonia/Influenza.....	2	50.0	12.5	.....	50.0	15.8	.....	50.0	18.9	.....
Chronic Obstructive Pulmonary Disease.....	0									
Transient Cerebral Ischemia.....	0									
Stroke.....	0									
Hip Fracture.....	0									
Sepsis.....	0									
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	0									
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

PARKER PHS INDIAN HOSPITAL
Medicare Provider Number: 030079

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 66.9 years

Proportion female..... 50.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 83.3 %

Transferred from skilled nursing facility..... 0.0 %

Admitted for elective procedure..... 0.0 %

Admitted for emergency..... 45.8 %

COMORBIDITIES:

Cancer..... 4.2 %

Chronic cardiovascular disease..... 8.3 %

Chronic liver disease..... 8.3 %

Chronic renal disease..... 0.0 %

Chronic pulmonary disease..... 4.2 %

Cerebrovascular degeneration..... 0.0 %

Diabetes mellitus..... 16.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City..... 1.6%

State 90.2%

Outside State 8.2%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 6.3 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 20

Occupancy Rate 25.0 %

Ownership/Control..... Federal Government

Medicare Discharges 19.2 %

Case Mix Index (CMI) 0.7516

STAFFING:

Total Number of Physicians..... (Not Available)

Percent of Physicians Board Certified Specialists(Not Available)

Medical Residents/Interns (Not Available)

Registered Nurses..... (Not Available)

Licensed Practical Nurses (Not Available)

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric No

Hospice Care No

Medical/Surgical Intensive Care No

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

PHOENIX BAPTIST HOSPITAL & MED CENTER

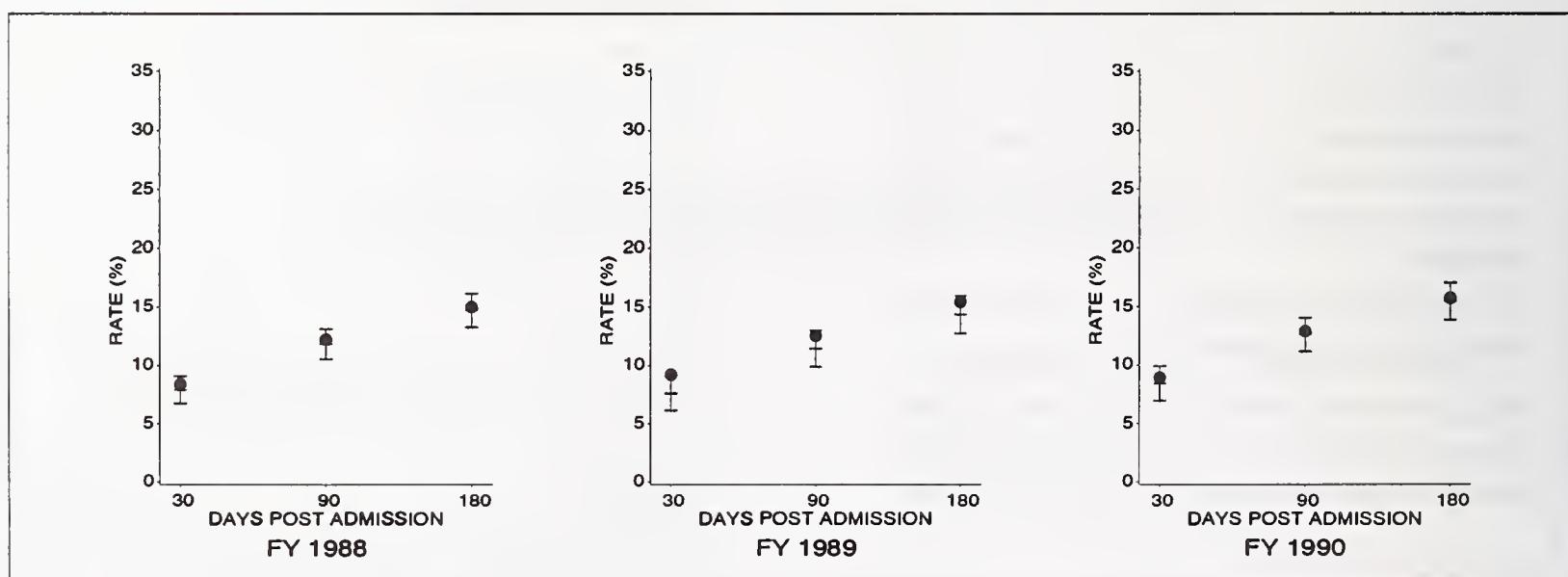
6025 NORTH 20TH AVENUE
PHOENIX, AZ 85015
Medicare Provider Number: 030030

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	2337	8.9	8.4	0.7	12.8	12.5	0.7	15.7	15.4	0.8
CONDITIONS:										
Acute Myocardial Infarction.....	79	15.2	24.0	7.4	19.0	26.6	7.8	20.3	29.0	8.5
Congestive Heart Failure.....	70	5.7	13.9	5.3	14.3	21.9	6.6	17.1	28.0	7.8
Pneumonia/Influenza.....	115	14.8	15.0	3.3	20.9	20.4	4.9	28.7	23.9	6.7
Chronic Obstructive Pulmonary Disease.....	41	19.5	7.0	-----	31.7	12.5	-----	43.9	16.9	-----
Transient Cerebral Ischemia.....	17	0.0	1.2	-----	0.0	2.7	-----	0.0	4.4	-----
Stroke.....	64	21.9	20.9	6.0	28.1	27.4	5.6	29.7	31.3	6.0
Hip Fracture.....	68	5.9	5.9	5.2	14.7	10.4	5.8	16.2	13.5	5.3
Sepsis.....	31	25.8	22.5	-----	32.3	29.0	-----	41.9	33.1	-----
PROCEDURES:										
Angioplasty.....	40	5.0	3.9	-----	5.0	4.9	-----	5.0	6.0	-----
Coronary Artery Bypass Graft.....	72	12.5	5.2	4.2	15.3	7.6	4.8	16.7	8.6	4.9
Initial Pacemaker Insertion.....	29	3.4	2.2	-----	3.4	4.6	-----	3.4	6.9	-----
Carotid Endarterectomy.....	9	0.0	0.9	-----	0.0	1.8	-----	0.0	2.6	-----
Hip Replacement/Reconstruction.....	49	8.2	3.0	-----	14.3	5.5	-----	14.3	7.3	-----
Open Reduction of Hip Fracture.....	16	0.0	4.2	-----	0.0	7.5	-----	6.3	10.0	-----
Prostatectomy.....	93	3.2	0.7	2.2	3.2	1.6	2.6	4.3	2.7	3.5
Cholecystectomy.....	43	2.3	1.7	-----	4.7	3.2	-----	9.3	4.5	-----
Hysterectomy.....	25	0.0	0.5	-----	0.0	1.1	-----	0.0	1.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PHOENIX BAPTIST HOSPITAL & MED CENTER
Medicare Provider Number: 030030

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	73.9 years
Proportion female.....	53.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	54.6 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	36.8 %
Admitted for emergency.....	48.3 %

COMORBIDITIES:

Cancer.....	6.2 %
Chronic cardiovascular disease.....	37.6 %
Chronic liver disease.....	0.6 %
Chronic renal disease.....	2.0 %
Chronic pulmonary disease.....	19.5 %
Cerebrovascular degeneration.....	2.4 %
Diabetes mellitus.....	6.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	87.7%
State	6.8%
Outside State	5.5%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.5 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	222
Occupancy Rate	55.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	42.5 %
Case Mix Index (CMI)	1.6132

STAFFING:

Total Number of Physicians.....	193
Percent of Physicians Board Certified Specialists	58.0 %
Medical Residents/Interns	21
Registered Nurses.....	231
Licensed Practical Nurses	11

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric.....	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

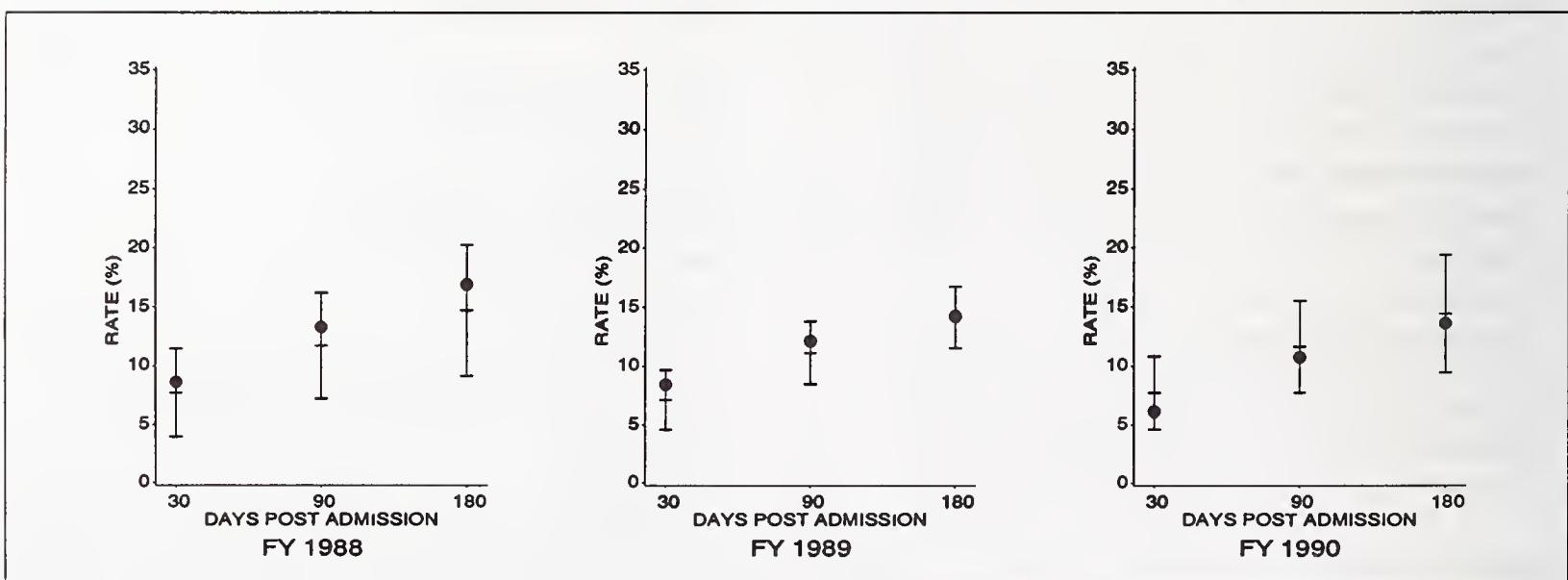
PHOENIX GEN HOSPITAL & MEDICAL CENTER
 19829 NORTH 27TH AVE
 PHOENIX, AZ 85027
 Medicare Provider Number: 030092

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	589	6.1	7.7	1.6	10.7	11.6	2.0	13.6	14.4	2.5
CONDITIONS:										
Acute Myocardial Infarction.....	13	46.2	23.8	-----	46.2	26.4	-----	46.2	28.3	-----
Congestive Heart Failure.....	29	10.3	12.8	-----	13.8	20.6	-----	13.8	26.2	-----
Pneumonia/Influenza.....	33	3.0	10.9	-----	12.1	15.0	-----	12.1	17.7	-----
Chronic Obstructive Pulmonary Disease.....	10	20.0	10.9	-----	20.0	17.4	-----	30.0	22.0	-----
Transient Cerebral Ischemia.....	8	0.0	2.0	-----	12.5	4.2	-----	12.5	6.5	-----
Stroke.....	18	5.6	11.8	-----	5.6	17.1	-----	11.1	20.3	-----
Hip Fracture.....	14	14.3	6.1	-----	21.4	11.5	-----	21.4	14.9	-----
Sepsis.....	9	0.0	21.2	-----	22.2	26.4	-----	22.2	31.0	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	3	0.0	5.4	-----	0.0	7.2	-----	0.0	8.2	-----
Initial Pacemaker Insertion.....	4	0.0	1.1	-----	0.0	2.5	-----	0.0	4.2	-----
Carotid Endarterectomy.....	2	0.0	1.8	-----	0.0	3.7	-----	0.0	5.8	-----
Hip Replacement/Reconstruction.....	14	7.1	4.9	-----	7.1	9.8	-----	7.1	13.3	-----
Open Reduction of Hip Fracture.....	5	20.0	3.4	-----	40.0	6.5	-----	40.0	8.7	-----
Prostatectomy.....	50	0.0	0.6	-----	0.0	1.4	-----	0.0	2.4	-----
Cholecystectomy.....	20	5.0	1.2	-----	5.0	2.1	-----	5.0	2.7	-----
Hysterectomy.....	7	0.0	1.8	-----	0.0	4.0	-----	0.0	6.0	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



PHOENIX GEN HOSPITAL & MEDICAL CENTER
Medicare Provider Number: 030092

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	72.6 years
Proportion female.....	49.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	53.8 %
Transferred from skilled nursing facility.....	0.5 %
Admitted for elective procedure.....	24.3 %
Admitted for emergency.....	51.3 %

COMORBIDITIES:

Cancer.....	4.2 %
Chronic cardiovascular disease.....	31.9 %
Chronic liver disease.....	1.5 %
Chronic renal disease.....	0.7 %
Chronic pulmonary disease.....	30.4 %
Cerebrovascular degeneration.....	2.9 %
Diabetes mellitus.....	5.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City.....	71.3%
State	15.8%
Outside State	12.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.1 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	95
Occupancy Rate	38.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	28.7 %
Case Mix Index (CMI)	1.3930

STAFFING:

Total Number of Physicians.....	129
Percent of Physicians Board Certified Specialists.....	65.9 %
Medical Residents/Interns	0
Registered Nurses.....	86
Licensed Practical Nurses.....	1

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

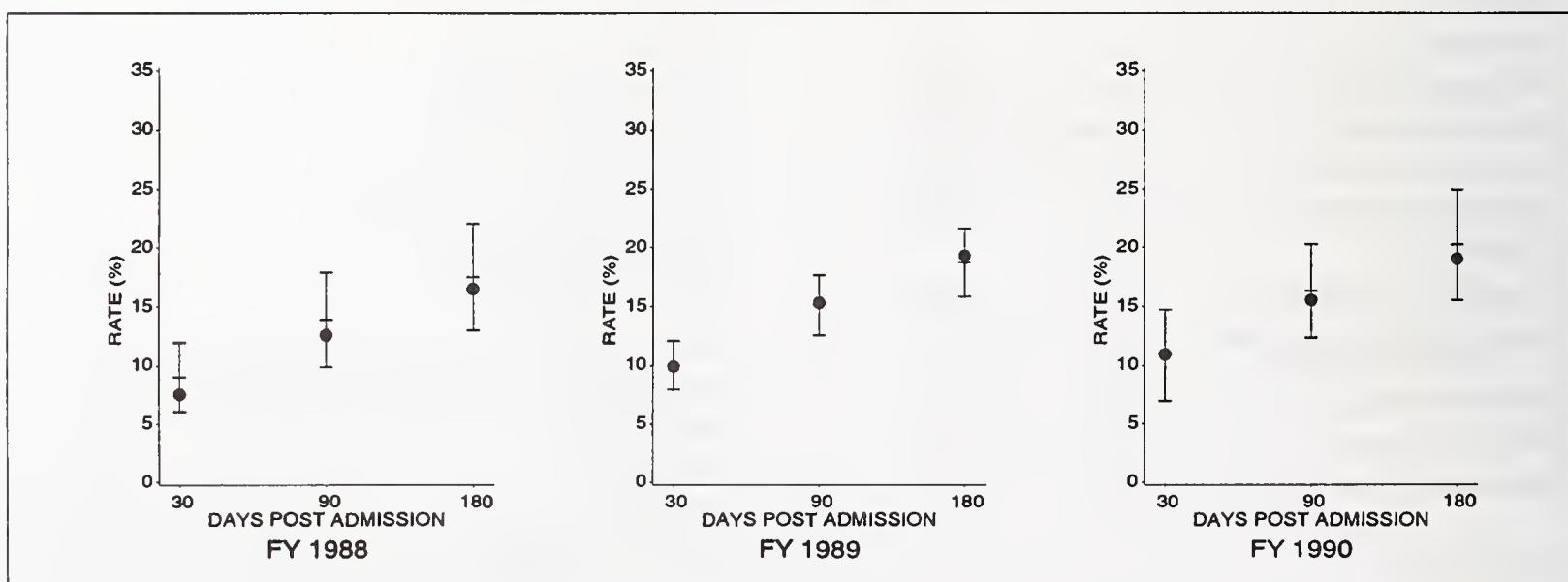
PHOENIX MEMORIAL HOSPITAL
 1201 SOUTH 7TH STREET
 PHOENIX, AZ 85007
 Medicare Provider Number: 030003

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	678	10.9	10.8	2.0	15.5	16.3	2.0	19.0	20.2	2.4
CONDITIONS:										
Acute Myocardial Infarction.....	21	23.8	25.9	-----	23.8	29.6	-----	28.6	32.4	-----
Congestive Heart Failure.....	45	2.2	14.6	-----	8.9	22.7	-----	15.6	29.3	-----
Pneumonia/Influenza.....	32	18.8	17.2	-----	28.1	23.6	-----	31.3	27.4	-----
Chronic Obstructive Pulmonary Disease.....	15	13.3	8.8	-----	13.3	14.9	-----	13.3	19.6	-----
Transient Cerebral Ischemia.....	8	0.0	1.4	-----	0.0	3.1	-----	0.0	5.0	-----
Stroke.....	27	18.5	21.3	-----	25.9	27.6	-----	33.3	31.4	-----
Hip Fracture.....	17	0.0	5.9	-----	0.0	10.8	-----	0.0	14.3	-----
Sepsis.....	27	7.4	23.4	-----	11.1	31.8	-----	22.2	36.6	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	3	0.0	2.2	-----	0.0	4.3	-----	0.0	6.5	-----
Carotid Endarterectomy.....	1	0.0	0.7	-----	0.0	1.3	-----	0.0	2.0	-----
Hip Replacement/Reconstruction.....	9	0.0	7.2	-----	0.0	14.3	-----	0.0	19.2	-----
Open Reduction of Hip Fracture.....	10	0.0	4.7	-----	0.0	8.9	-----	0.0	11.9	-----
Prostatectomy.....	12	0.0	1.4	-----	8.3	3.0	-----	8.3	4.9	-----
Cholecystectomy.....	21	0.0	3.8	-----	0.0	7.4	-----	4.8	9.8	-----
Hysterectomy.....	7	0.0	0.1	-----	0.0	0.3	-----	0.0	0.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE ($\pm 2 SD$)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



PHOENIX MEMORIAL HOSPITAL
Medicare Provider Number: 030003

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	71.4 years
Proportion female.....	54.7 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	41.0 %
Transferred from skilled nursing facility.....	2.1 %
Admitted for elective procedure.....	6.5 %
Admitted for emergency.....	48.2 %

COMORBIDITIES:

Cancer.....	7.1 %
Chronic cardiovascular disease.....	30.3 %
Chronic liver disease.....	1.6 %
Chronic renal disease.....	6.6 %
Chronic pulmonary disease.....	19.4 %
Cerebrovascular degeneration.....	5.4 %
Diabetes mellitus.....	15.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	93.4%
State	2.5%
Outside State	4.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.6 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	172
Occupancy Rate	60.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	13.2 %
Case Mix Index (CMI)	1.3652

STAFFING:

Total Number of Physicians.....	480
Percent of Physicians Board Certified Specialists.....	74.4 %
Medical Residents/Interns	0
Registered Nurses.....	184
Licensed Practical Nurses	23

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

PHS INDIAN HOSPITAL

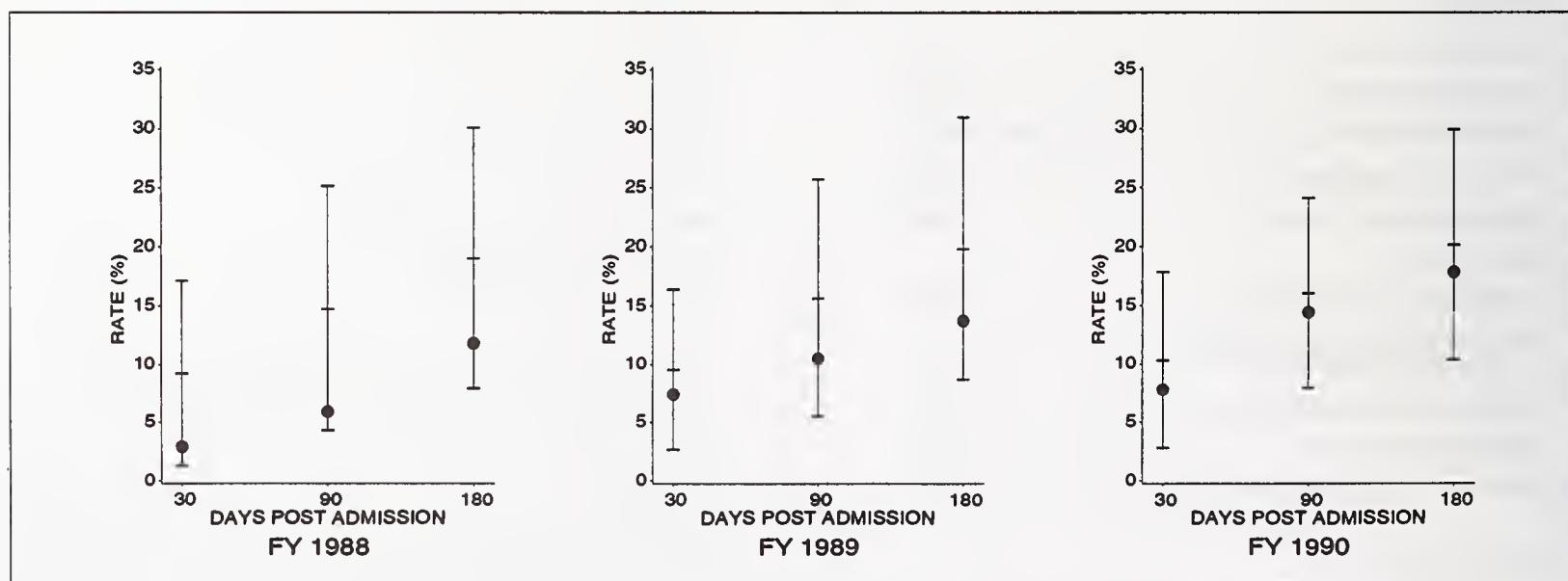
P O BOX 649
 FORT DEFIANCE, AZ 86504
 Medicare Provider Number: 030071

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)											
		30 DAYS			90 DAYS			180 DAYS					
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	90	7.8	10.3	3.8	14.4	16.0	4.0	17.8	20.1	4.9			
CONDITIONS:													
Acute Myocardial Infarction.....	1	0.0	44.4	----	0.0	48.2	----	0.0	52.8	----			
Congestive Heart Failure.....	7	0.0	15.9	----	28.6	23.1	----	28.6	29.3	----			
Pneumonia/Influenza.....	4	0.0	8.4	----	0.0	12.1	----	0.0	14.6	----			
Chronic Obstructive Pulmonary Disease.....	2	0.0	10.3	----	0.0	20.6	----	50.0	27.6	----			
Transient Cerebral Ischemia.....	0												
Stroke.....	3	33.3	11.4	----	33.3	16.0	----	33.3	18.8	----			
Hip Fracture.....	0												
Sepsis.....	4	0.0	23.2	----	0.0	28.8	----	0.0	33.0	----			
PROCEDURES:													
Angioplasty.....	0												
Coronary Artery Bypass Graft.....	0												
Initial Pacemaker Insertion.....	0												
Carotid Endarterectomy.....	0												
Hip Replacement/Reconstruction.....	0												
Open Reduction of Hip Fracture.....	0												
Prostatectomy.....	0												
Cholecystectomy.....	0												
Hysterectomy.....	0												

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD)
 FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



PHS INDIAN HOSPITAL
Medicare Provider Number: 030071

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 75.5 years
Proportion female..... 53.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 2.2 %
Transferred from skilled nursing facility..... 0.0 %
Admitted for elective procedure..... 6.7 %
Admitted for emergency..... 58.9 %

COMORBIDITIES:

Cancer..... 1.1 %
Chronic cardiovascular disease..... 13.3 %
Chronic liver disease..... 3.3 %
Chronic renal disease..... 7.8 %
Chronic pulmonary disease..... 4.4 %
Cerebrovascular degeneration..... 3.3 %
Diabetes mellitus..... 16.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 77.6%
State 4.8%
Outside State 17.6%
Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 7.9 Days
State 6.8 Days
National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 49
Occupancy Rate 49.0 %
Ownership/Control..... Federal Government
Medicare Discharges(Not Available)
Case Mix Index (CMI) 1.0145

STAFFING:

Total Number of Physicians..... 18
Percent of Physicians Board Certified Specialists..... 94.4 %
Medical Residents/Interns 0
Registered Nurses..... 34
Licensed Practical Nurses 13

SPECIALTY SERVICES:

Burn Unit No
Cardiac Intensive Care No
Comprehensive Geriatric No
Hospice Care No
Medical/Surgical Intensive Care Yes
Organ/Tissue Transplant No
Other Intensive Care No
Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No
Rehabilitation No
Psychiatric No
Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

PHS INDIAN HOSPITAL

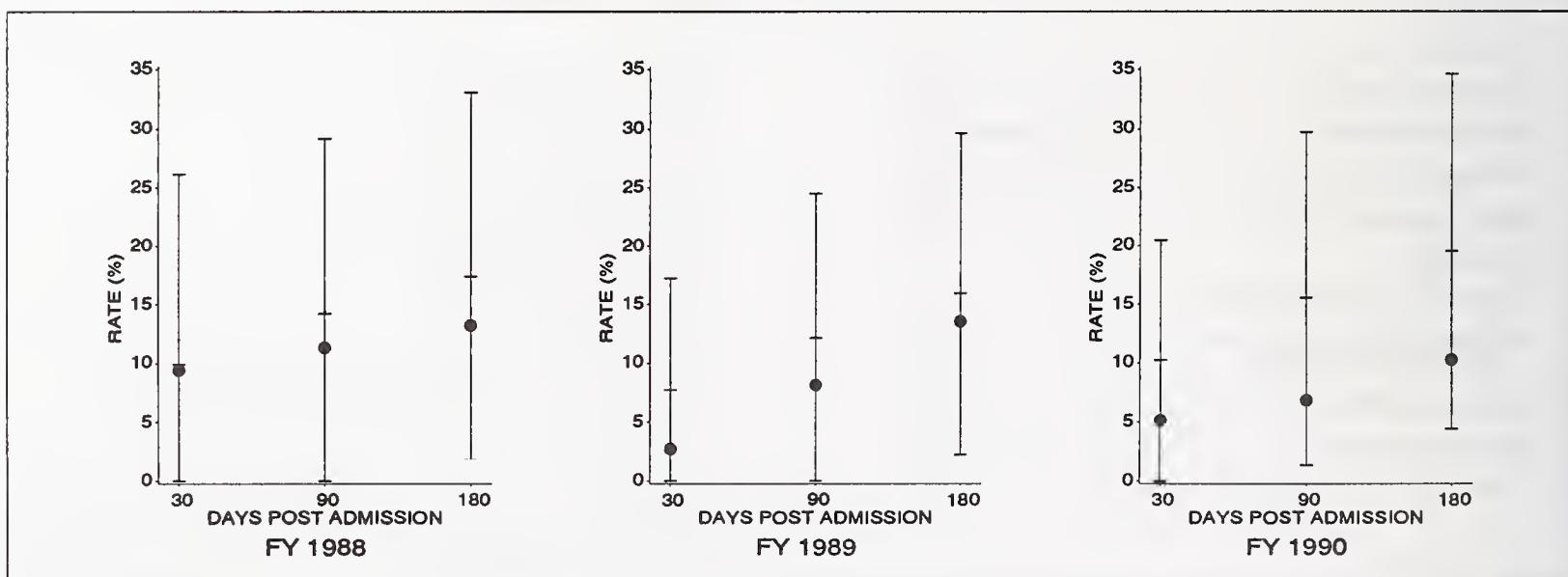
P O BOX 98
KEAMS CANYON, AZ 86034
Medicare Provider Number: 030072

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	59	5.1	10.2	5.1	6.8	15.5	7.1	10.2	19.5	7.6
CONDITIONS:										
Acute Myocardial Infarction.....	1	0.0	36.1	----	0.0	40.0	----	0.0	45.4	----
Congestive Heart Failure.....	4	0.0	15.4	----	0.0	25.6	----	25.0	31.3	----
Pneumonia/Influenza.....	9	0.0	15.0	----	11.1	20.9	----	11.1	24.3	----
Chronic Obstructive Pulmonary Disease.....	0									
Transient Cerebral Ischemia.....	2	0.0	1.2	----	0.0	3.1	----	0.0	5.5	----
Stroke.....	3	0.0	19.6	----	0.0	23.5	----	0.0	27.3	----
Hip Fracture.....	1	0.0	7.6	----	0.0	15.5	----	0.0	21.6	----
Sepsis.....	0									
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	0									
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



PHS INDIAN HOSPITAL
Medicare Provider Number: 030072

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission.....	75.6 years	Cancer.....	3.4 %
Proportion female.....	45.8 %	Chronic cardiovascular disease.....	18.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease.....	
Referred by personal or HMO physician.....	98.3 %	Chronic renal disease.....	5.1 %
Transferred from skilled nursing facility.....	0.0 %	Chronic pulmonary disease.....	1.7 %
Admitted for elective procedure.....	0.0 %	Cerebrovascular degeneration.....	3.4 %
Admitted for emergency.....	98.3 %	Diabetes mellitus.....	18.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:		MEDICARE AVERAGE LENGTH OF STAY:	
County/City	86.2%	Hospital	5.1 Days
State	13.8%	State	6.8 Days
Outside State	0.0%	National	8.6 Days
Total	100.0%		

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1981

PROFILE:		SPECIALTY SERVICES:	
Total Beds	38	Burn Unit	No
Ownership/Control.....	Federal Government	Coronary Care Unit	No
Case Mix Index (CMI)	0.8905	Hospice Care	No
STAFFING:		Intensive Care Unit <th data-kind="ghost"></th>	
Medical Residents/Interns	8	Organ Transplant	No
Registered Nurses.....	15	Trauma Center	No
Licensed Practical Nurses	8	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:	
		Alcohol/Drug	No
		Rehabilitation.....	No
		Psychiatric	No
		Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

PHS INDIAN HOSPITAL

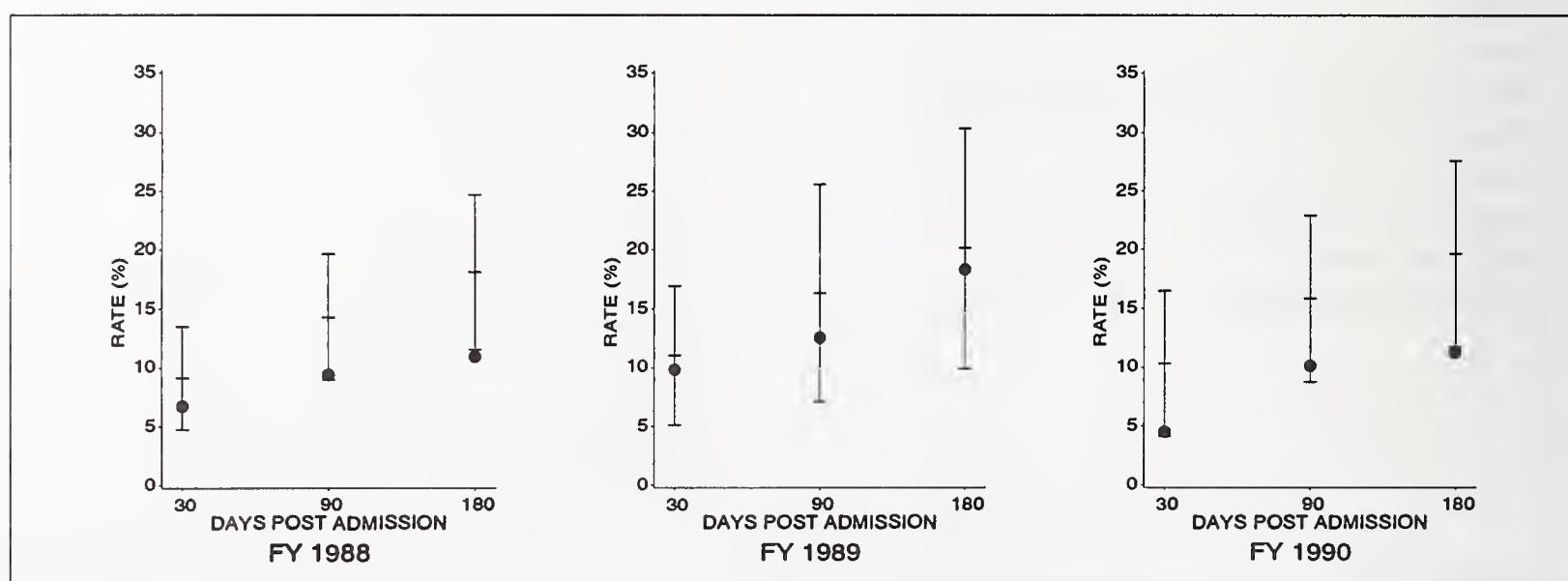
TUBA CITY, AZ 86045
Medicare Provider Number: 030073

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	178	4.5	10.3	3.1	10.1	15.8	3.5	11.2	19.6	4.0
CONDITIONS:										
Acute Myocardial Infarction.....	4	0.0	28.9	----	0.0	32.5	----	0.0	36.2	----
Congestive Heart Failure.....	2	0.0	23.5	----	0.0	33.5	----	0.0	43.0	----
Pneumonia/Influenza.....	13	15.4	11.9	----	23.1	16.7	----	23.1	19.5	----
Chronic Obstructive Pulmonary Disease.....	2	0.0	9.1	----	50.0	15.6	----	100.0	21.9	----
Transient Cerebral Ischemia.....	0									
Stroke.....	6	16.7	24.1	----	33.3	33.1	----	33.3	37.8	----
Hip Fracture.....	0									
Sepsis.....	0									
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	7	0.0	0.7	----	0.0	1.8	----	0.0	3.3	----
Cholecystectomy.....	8	0.0	4.1	----	0.0	8.2	----	0.0	11.1	----
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PHS INDIAN HOSPITAL
Medicare Provider Number: 030073

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission.....	75.3 years	Cancer.....	2.2 %
Proportion female.....	51.1 %	Chronic cardiovascular disease.....	12.9 %
ADMISSION SOURCES/TYPES:		Chronic liver disease.....	
Referred by personal or HMO physician.....	1.7 %	Chronic renal disease.....	13.5 %
Transferred from skilled nursing facility.....	0.0 %	Chronic pulmonary disease.....	5.1 %
Admitted for elective procedure.....	10.7 %	Cerebrovascular degeneration.....	3.4 %
Admitted for emergency.....	65.7 %	Diabetes mellitus.....	14.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:		MEDICARE AVERAGE LENGTH OF STAY:	
County/City	63.0%	Hospital	6.7 Days
State	32.1%	State	6.8 Days
Outside State	4.9%	National	8.6 Days
Total	100.0%		

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	SPECIALTY SERVICES:
Total Beds	85
Occupancy Rate	44.0 %
Ownership/Control.....	Federal Government
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.1298
STAFFING:	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:
Total Number of Physicians.....	27
Percent of Physicians Board Certified Specialists.....	66.7 %
Medical Residents/Interns	0
Registered Nurses.....	79
Licensed Practical Nurses	28
** Except for CMI	Alcohol/Drug
	Rehabilitation.....
	Psychiatric
	Medicare Swing Beds

* Not used in calculating mortality rates

PHS INDIAN HOSPITAL
 P O BOX 548
 SELLS, AZ 85634
 Medicare Provider Number: 030074

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	35	5.7	7.2	----	5.7	11.6	----	8.6	14.9	----
CONDITIONS:										
Acute Myocardial Infarction.....	0									
Congestive Heart Failure.....	1	0.0	12.0	----	0.0	19.4	----	0.0	24.0	----
Pneumonia/Influenza.....	3	0.0	26.7	----	0.0	39.7	----	0.0	45.9	----
Chronic Obstructive Pulmonary Disease.....	1	0.0	1.8	----	0.0	3.7	----	100.0	5.1	----
Transient Cerebral Ischemia.....	0									
Stroke.....	0									
Hip Fracture.....	1	0.0	4.1	----	0.0	7.8	----	0.0	10.9	----
Sepsis.....	2	50.0	19.6	----	50.0	25.0	----	50.0	28.2	----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	0									
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

PHS INDIAN HOSPITAL
Medicare Provider Number: 030074

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission.....	71.4 years	Cancer.....	2.9 %
Proportion female.....	62.9 %	Chronic cardiovascular disease.....	8.6 %
ADMISSION SOURCES/TYPES:		Chronic liver disease.....	
Referred by personal or HMO physician.....	0.0 %	Chronic renal disease.....	5.7 %
Transferred from skilled nursing facility.....	0.0 %	Chronic pulmonary disease.....	5.7 %
Admitted for elective procedure.....	5.7 %	Cerebrovascular degeneration.....	2.9 %
Admitted for emergency.....	0.0 %	Diabetes mellitus.....	25.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:		MEDICARE AVERAGE LENGTH OF STAY:	
County/City.....	77.9%	Hospital	10.2 Days
State	22.1%	State	6.8 Days
Outside State	0.0%	National	8.6 Days
Total	100.0%		

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:		SPECIALTY SERVICES:	
Total Beds	34	Burn Unit	No
Occupancy Rate	47.0 %	Cardiac Intensive Care	No
Ownership/Control.....	Federal Government	Comprehensive Geriatric	No
Medicare Discharges	(Not Available)	Hospice Care	No
Case Mix Index (CMI)	1.1864	Medical/Surgical Intensive Care	No
STAFFING:		Organ/Tissue Transplant	No
Total Number of Physicians.....	12	Other Intensive Care	No
Percent of Physicians Board Certified Specialists.....	100.0 %	Trauma Center	No
Medical Residents/Interns	0	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:	
Registered Nurses.....	9	Alcohol/Drug	No
Licensed Practical Nurses	40	Rehabilitation.....	Yes

** Except for CMI

* Not used in calculating mortality rates

PHS INDIAN HOSPITAL

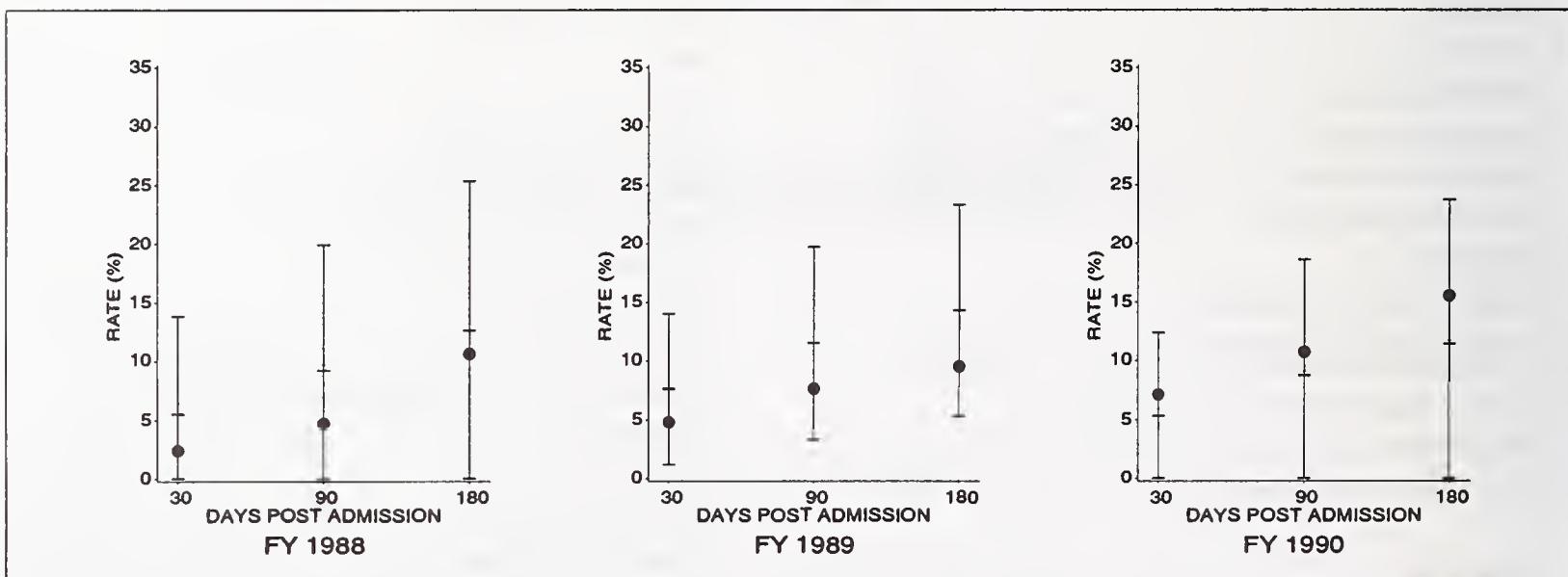
WHITE RIVER, AZ 85941
Medicare Provider Number: 030075

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	84	7.1	5.3	3.5	10.7	8.7	5.0	15.5	11.4	6.2
CONDITIONS:										
Acute Myocardial Infarction.....	0									
Congestive Heart Failure.....	1	100.0	17.6	----	100.0	25.9	----	100.0	31.7	----
Pneumonia/Influenza.....	11	18.2	8.8	----	18.2	12.2	----	18.2	14.7	----
Chronic Obstructive Pulmonary Disease.....	0									
Transient Cerebral Ischemia.....	0									
Stroke.....	1	0.0	14.5	----	0.0	25.4	----	0.0	31.0	----
Hip Fracture.....	1	0.0	7.6	----	0.0	11.8	----	0.0	14.6	----
Sepsis.....	0									
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	0									
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



PHS INDIAN HOSPITAL
Medicare Provider Number: 030075

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission.....	66.7 years	Cancer.....	2.4 %
Proportion female.....	57.1 %	Chronic cardiovascular disease.....	16.7 %
ADMISSION SOURCES/TYPES:		Chronic liver disease.....	
Referred by personal or HMO physician.....	95.2 %	Chronic renal disease.....	6.0 %
Transferred from skilled nursing facility.....	0.0 %	Chronic pulmonary disease.....	8.3 %
Admitted for elective procedure.....	4.8 %	Cerebrovascular degeneration.....	6.0 %
Admitted for emergency.....	95.2 %	Diabetes mellitus.....	11.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:		MEDICARE AVERAGE LENGTH OF STAY:	
County/City	976.0%	Hospital	7.8 Days
State	24.0%	State	6.8 Days
Outside State	0.0%	National	8.6 Days
Total	1000%		

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990			
PROFILE:		SPECIALTY SERVICES:	
Total Beds	49	Burn Unit	No
Occupancy Rate	51.0 %	Cardiac Intensive Care	No
Ownership/Control.....	Federal Government	Comprehensive Geriatric	Yes
Medicare Discharges	10.9 %	Hospice Care	No
Case Mix Index (CMI)	0.9029	Medical/Surgical Intensive Care	No
STAFFING:		Organ/Tissue Transplant	No
Total Number of Physicians.....	15	Other Intensive Care	No
Percent of Physicians Board Certified Specialists	100.0 %	Trauma Center	No
Medical Residents/Interns	0	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:	
Registered Nurses.....	59	Alcohol/Drug	No
Licensed Practical Nurses	11	Rehabilitation.....	No
** Except for CMI		Psychiatric	No
		Medicare Swing Beds	No

* Not used in calculating mortality rates

PHS INDIAN HOSPITAL

SACATON, AZ 85247
Medicare Provider Number: 030076

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	48	0.0	6.8	----	2.1	11.8	----	2.1	15.7	----
CONDITIONS:										
Acute Myocardial Infarction.....	0									
Congestive Heart Failure.....	3	0.0	26.8	----	33.3	45.7	----	33.3	55.4	----
Pneumonia/Influenza.....	6	0.0	11.2	----	0.0	15.2	----	0.0	18.0	----
Chronic Obstructive Pulmonary Disease.....	0									
Transient Cerebral Ischemia.....	0									
Stroke.....	0									
Hip Fracture.....	0									
Sepsis.....	1	0.0	4.0	----	0.0	6.2	----	0.0	8.9	----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	0									
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

PHS INDIAN HOSPITAL
Medicare Provider Number: 030076

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 64.4 years
Proportion female..... 52.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 87.5 %
Transferred from skilled nursing facility..... 0.0 %
Admitted for elective procedure..... 0.0 %
Admitted for emergency..... 91.7 %

COMORBIDITIES:

Cancer.....	2.1 %
Chronic cardiovascular disease.....	10.4 %
Chronic liver disease.....	4.2 %
Chronic renal disease.....	12.5 %
Chronic pulmonary disease.....	4.2 %
Cerebrovascular degeneration.....	4.2 %
Diabetes mellitus.....	50.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	95.7%
State	4.3%
Outside State	0.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	9.5 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	20
Occupancy Rate	55.0 %
Ownership/Control.....	Federal Government
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	0.9900

STAFFING:

Total Number of Physicians.....	12
Percent of Physicians Board Certified Specialists.....	91.7 %
Medical Residents/Interns	0
Registered Nurses.....	35
Licensed Practical Nurses.....	18

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

PHS INDIAN MEDICAL CENTER

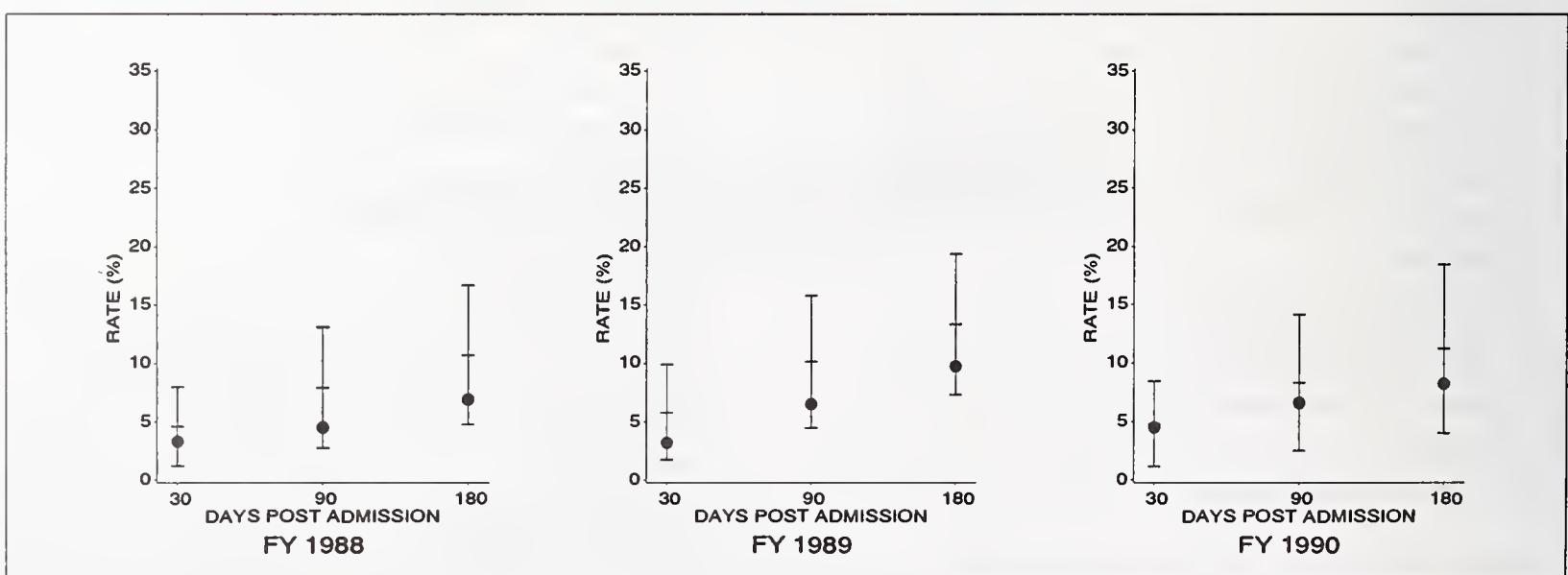
4212 N 16TH STREET
PHOENIX, AZ 85016
Medicare Provider Number: 030078

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	243	4.5	4.8	1.8	6.6	8.3	2.9	8.2	11.2	3.6
CONDITIONS:										
Acute Myocardial Infarction.....	1	0.0	10.8	-----	0.0	11.8	-----	0.0	13.1	-----
Congestive Heart Failure.....	6	0.0	12.9	-----	0.0	21.9	-----	0.0	28.5	-----
Pneumonia/Influenza.....	7	0.0	15.2	-----	0.0	22.5	-----	0.0	26.4	-----
Chronic Obstructive Pulmonary Disease.....	2	0.0	6.1	-----	0.0	10.0	-----	0.0	12.5	-----
Transient Cerebral Ischemia.....	0									
Stroke.....	0									
Hip Fracture.....	0									
Sepsis.....	1	100.0	39.5	-----	100.0	61.8	-----	100.0	70.8	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	2	0.0	0.6	-----	0.0	1.4	-----	0.0	2.3	-----
Cholecystectomy.....	3	0.0	1.6	-----	0.0	3.0	-----	0.0	3.7	-----
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



PHS INDIAN MEDICAL CENTER
Medicare Provider Number: 030078

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 70.2 years

Proportion female..... 48.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 98.8 %

Transferred from skilled nursing facility..... 0.0 %

Admitted for elective procedure..... 0.0 %

Admitted for emergency..... 98.8 %

COMORBIDITIES:

Cancer..... 2.5 %

Chronic cardiovascular disease..... 11.5 %

Chronic liver disease..... 2.1 %

Chronic renal disease..... 8.2 %

Chronic pulmonary disease..... 2.5 %

Cerebrovascular degeneration..... 2.5 %

Diabetes mellitus..... 21.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 37.7%

State 57.0%

Outside State 5.3%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 16.1 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 147

Occupancy Rate 69.0 %

Ownership/Control..... Federal Government

Medicare Discharges(Not Available)

Case Mix Index (CMI) 1.0035

STAFFING:

Total Number of Physicians..... 63

Percent of Physicians Board Certified Specialists..... 68.3 %

Medical Residents/Interns 4

Registered Nurses..... 112

Licensed Practical Nurses 52

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric Yes

Hospice Care No

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant Yes

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

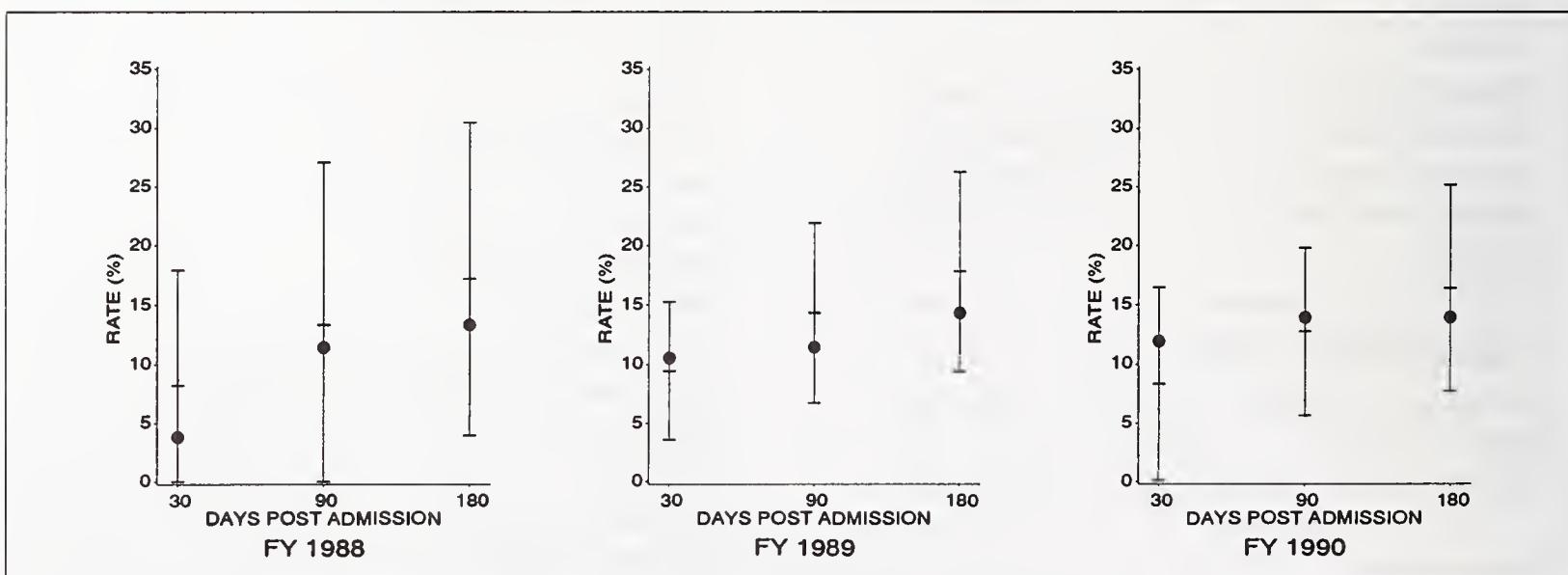
SAGE MEMORIAL HOSPITAL
 GANADO MISSION PO BOX 457
 GANADO, AZ 86505
 Medicare Provider Number: 030004

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	101	11.9	8.3	4.1	13.9	12.7	3.5	13.9	16.4	4.4
CONDITIONS:										
Acute Myocardial Infarction.....	0									
Congestive Heart Failure.....	9	0.0	11.6	-----	0.0	19.0	-----	0.0	24.8	-----
Pneumonia/Influenza.....	17	23.5	11.9	-----	23.5	16.5	-----	23.5	19.5	-----
Chronic Obstructive Pulmonary Disease.....	0									
Transient Cerebral Ischemia.....	2	0.0	1.6	-----	0.0	4.4	-----	0.0	8.1	-----
Stroke.....	3	33.3	18.5	-----	33.3	22.9	-----	33.3	26.5	-----
Hip Fracture.....	0									
Sepsis.....	6	33.3	26.7	-----	50.0	32.4	-----	50.0	36.9	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	0									
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



SAGE MEMORIAL HOSPITAL
Medicare Provider Number: 030004

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 76.1 years
Proportion female..... 51.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 58.4 %
Transferred from skilled nursing facility..... 1.0 %
Admitted for elective procedure..... 11.9 %
Admitted for emergency..... 61.4 %

COMORBIDITIES:

Cancer.....	4.0 %
Chronic cardiovascular disease.....	10.9 %
Chronic liver disease.....	0.0 %
Chronic renal disease.....	0.0 %
Chronic pulmonary disease.....	5.9 %
Cerebrovascular degeneration.....	5.0 %
Diabetes mellitus.....	8.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	89.3%
State	6.9%
Outside State	3.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.9 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	25
Occupancy Rate	21.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	21.9 %
Case Mix Index (CMI)	0.9592

STAFFING:

Total Number of Physicians.....	8
Percent of Physicians Board Certified Specialists	100.0 %
Medical Residents/Interns	0
Registered Nurses.....	18
Licensed Practical Nurses	0

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	No
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No
OTHER SPECIALTY/HOSPITAL-BASED SERVICES:	
Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

SCOTTSDALE MEMORIAL HOSPITAL

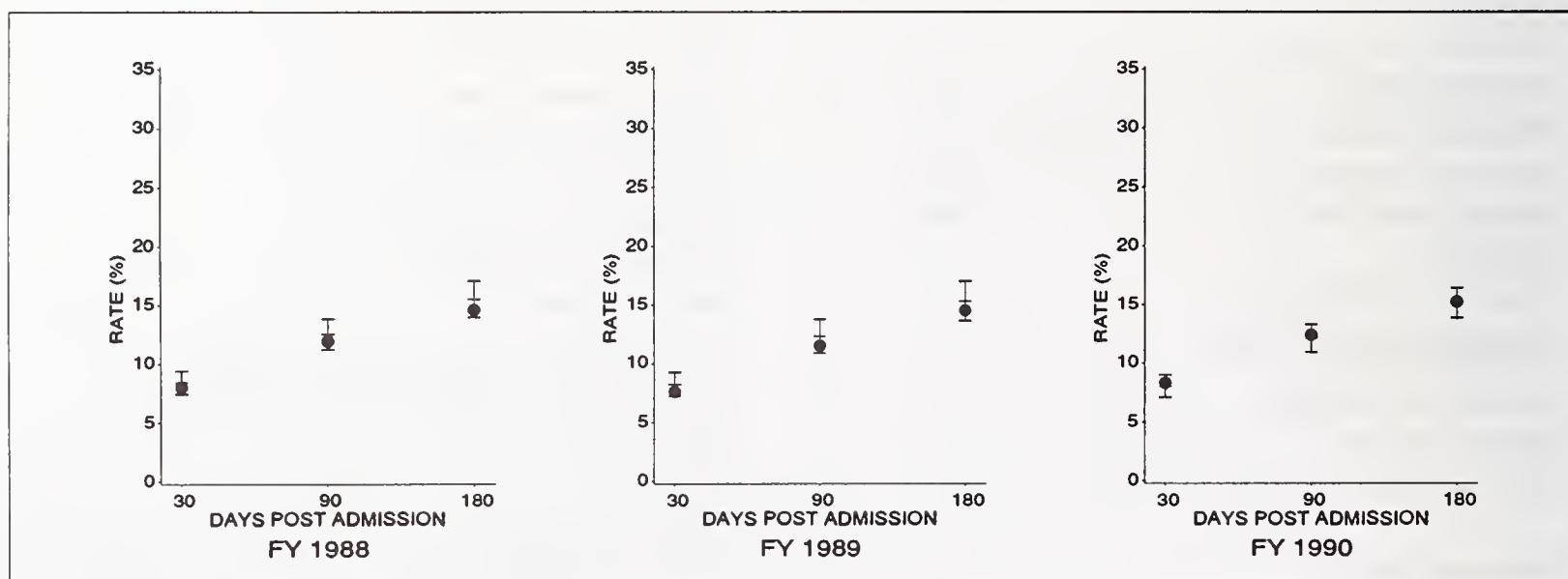
7400 EAST OSBORN ROAD
SCOTTSDALE, AZ 85251
Medicare Provider Number: 030038

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	3874	8.3	8.0	0.5	12.4	12.1	0.6	15.2	15.1	0.6
CONDITIONS:										
Acute Myocardial Infarction.....	116	21.6	25.5	6.1	25.0	28.0	6.0	25.9	30.5	5.8
Congestive Heart Failure.....	154	16.9	15.5	3.5	24.0	24.5	3.5	29.9	30.8	4.0
Pneumonia/Influenza.....	98	18.4	15.6	6.5	25.5	21.4	6.6	29.6	25.0	7.4
Chronic Obstructive Pulmonary Disease.....	42	9.5	6.8	-----	11.9	12.2	-----	14.3	16.1	-----
Transient Cerebral Ischemia.....	72	2.8	1.4	3.4	5.6	3.3	3.6	6.9	5.5	3.8
Stroke.....	137	16.1	21.3	6.7	25.5	27.4	6.1	29.2	31.0	5.7
Hip Fracture.....	111	6.3	5.1	3.7	14.4	9.4	6.1	17.1	12.5	6.5
Sepsis.....	26	11.5	20.9	-----	23.1	28.0	-----	30.8	32.2	-----
PROCEDURES:										
Angioplasty.....	81	3.7	3.7	2.1	4.9	5.0	2.5	4.9	6.0	2.8
Coronary Artery Bypass Graft.....	108	2.8	5.5	2.6	4.6	7.5	3.2	5.6	8.3	3.1
Initial Pacemaker Insertion.....	64	1.6	2.5	2.4	3.1	4.9	3.4	6.3	7.1	3.7
Carotid Endarterectomy.....	12	8.3	1.2	-----	8.3	2.1	-----	8.3	3.0	-----
Hip Replacement/Reconstruction.....	115	1.7	2.5	2.0	7.0	4.7	2.7	7.8	6.5	2.7
Open Reduction of Hip Fracture.....	54	7.4	4.9	4.3	13.0	9.3	5.5	14.8	12.5	5.1
Prostatectomy.....	103	1.9	0.8	1.1	4.9	1.8	2.0	7.8	3.2	2.7
Cholecystectomy.....	74	1.4	2.3	2.1	2.7	4.4	3.2	5.4	5.9	3.1
Hysterectomy.....	40	2.5	0.3	-----	2.5	0.8	-----	2.5	1.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE ($\pm 2 SD$) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SCOTTSDALE MEMORIAL HOSPITAL
Medicare Provider Number: 030038

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 74.8 years

Proportion female..... 53.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 45.5 %

Transferred from skilled nursing facility..... 0.3 %

Admitted for elective procedure..... 23.4 %

Admitted for emergency..... 51.7 %

COMORBIDITIES:

Cancer..... 7.5 %

Chronic cardiovascular disease..... 30.3 %

Chronic liver disease..... 0.7 %

Chronic renal disease..... 1.8 %

Chronic pulmonary disease..... 10.9 %

Cerebrovascular degeneration..... 2.8 %

Diabetes mellitus..... 5.4 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 83.5%

State 5.0%

Outside State 11.5%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 7.1 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 362

Occupancy Rate 62.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 43.0 %

Case Mix Index (CMI) 1.4499

STAFFING:

Total Number of Physicians..... 213

Percent of Physicians Board Certified Specialists 90.6 %

Medical Residents/Interns 18

Registered Nurses..... 368

Licensed Practical Nurses 34

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care Yes

Comprehensive Geriatric No

Hospice Care Yes

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds Yes

** Except for CMI

* Not used in calculating mortality rates

SCOTTSDALE MEMORIAL HOSPITAL NORTH

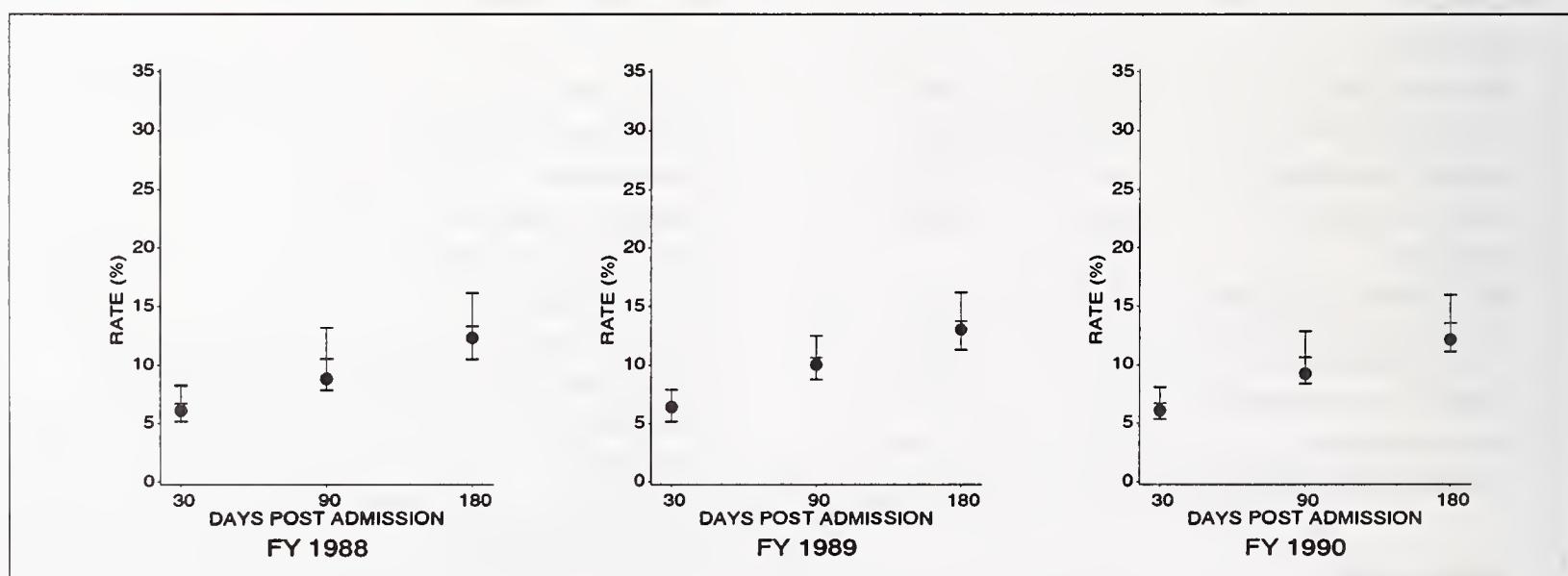
10450 NORTH 92ND STREET
SCOTTSDALE, AZ 85261
Medicare Provider Number: 030087

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	2345	6.1	6.7	0.7	9.2	10.6	1.1	12.1	13.5	1.2
CONDITIONS:										
Acute Myocardial Infarction.....	48	27.1	23.7	-----	31.3	26.2	-----	37.5	28.7	-----
Congestive Heart Failure.....	72	9.7	14.6	7.3	16.7	23.0	10.1	20.8	29.1	11.0
Pneumonia/Influenza.....	56	16.1	14.6	5.4	21.4	20.4	5.8	23.2	24.2	5.8
Chronic Obstructive Pulmonary Disease.....	26	19.2	7.5	-----	26.9	13.2	-----	30.8	17.5	-----
Transient Cerebral Ischemia.....	19	0.0	1.6	-----	0.0	3.5	-----	5.3	5.6	-----
Stroke.....	42	11.9	19.8	-----	14.3	25.3	-----	16.7	28.7	-----
Hip Fracture.....	40	7.5	5.9	-----	7.5	10.7	-----	12.5	13.9	-----
Sepsis.....	22	27.3	27.8	-----	36.4	37.2	-----	36.4	42.6	-----
PROCEDURES:										
Angioplasty.....	14	0.0	2.0	-----	0.0	2.6	-----	7.1	3.4	-----
Coronary Artery Bypass Graft.....	28	7.1	3.6	-----	7.1	4.5	-----	7.1	5.2	-----
Initial Pacemaker Insertion.....	16	0.0	1.5	-----	0.0	3.2	-----	0.0	4.9	-----
Carotid Endarterectomy.....	10	0.0	1.1	-----	0.0	2.2	-----	0.0	3.2	-----
Hip Replacement/Reconstruction.....	82	1.2	1.2	1.2	1.2	2.3	1.9	2.4	3.2	2.6
Open Reduction of Hip Fracture.....	20	10.0	6.2	-----	10.0	11.6	-----	15.0	15.4	-----
Prostatectomy.....	200	1.0	0.5	0.6	1.0	1.2	0.8	1.5	2.1	1.2
Cholecystectomy.....	44	6.8	1.7	-----	6.8	3.3	-----	6.8	4.6	-----
Hysterectomy.....	46	0.0	0.4	-----	0.0	1.0	-----	0.0	1.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SCOTTSDALE MEMORIAL HOSPITAL NORTH
Medicare Provider Number: 030087

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	72.7 years
Proportion female.....	49.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	64.8 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	45.1 %
Admitted for emergency.....	33.1 %

COMORBIDITIES:

Cancer.....	11.0 %
Chronic cardiovascular disease.....	24.6 %
Chronic liver disease.....	0.6 %
Chronic renal disease.....	1.6 %
Chronic pulmonary disease.....	9.9 %
Cerebrovascular degeneration.....	1.6 %
Diabetes mellitus.....	3.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	64.2%
State	9.6%
Outside State	26.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.8 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	178
Occupancy Rate	61.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	41.8 %
Case Mix Index (CMI)	1.4496

STAFFING:

Total Number of Physicians.....	636
Percent of Physicians Board Certified Specialists.....	80.3 %
Medical Residents/Interns	0
Registered Nurses.....	214
Licensed Practical Nurses	14

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

SIERRA VISTA COMMUNITY HOSPITAL

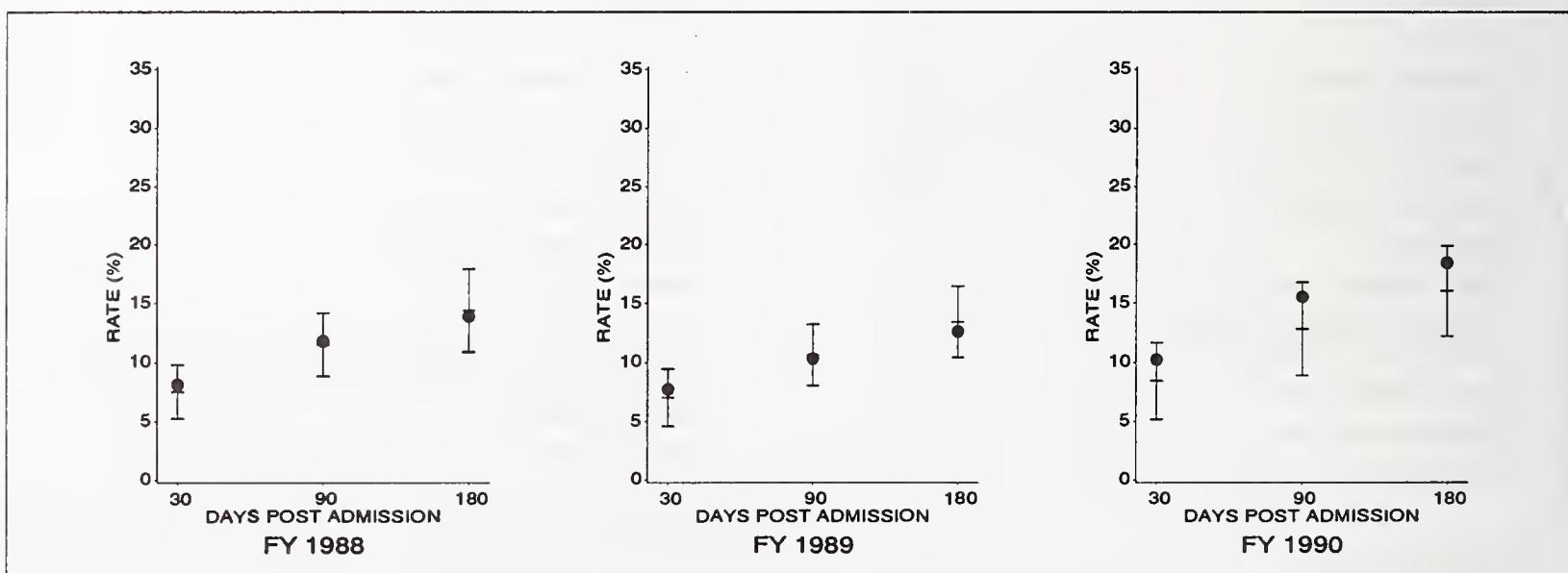
300 EL CAMINO REAL
SIERRA VISTA, AZ 85635
Medicare Provider Number: 030043

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	619	10.2	8.4	1.6	15.5	12.8	2.0	18.4	16.0	1.9
CONDITIONS:										
Acute Myocardial Infarction.....	20	25.0	21.8	-----	25.0	26.0	-----	30.0	29.2	-----
Congestive Heart Failure.....	32	15.6	13.2	-----	25.0	20.9	-----	31.3	26.8	-----
Pneumonia/Influenza.....	28	7.1	14.8	-----	7.1	20.7	-----	10.7	24.7	-----
Chronic Obstructive Pulmonary Disease.....	18	16.7	8.2	-----	27.8	14.7	-----	27.8	19.5	-----
Transient Cerebral Ischemia.....	8	12.5	2.2	-----	25.0	5.1	-----	25.0	8.6	-----
Stroke.....	17	5.9	20.2	-----	11.8	26.9	-----	11.8	31.2	-----
Hip Fracture.....	21	19.0	7.1	-----	28.6	12.1	-----	33.3	15.5	-----
Sepsis.....	4	25.0	32.9	-----	50.0	41.3	-----	50.0	46.8	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	15	0.0	3.9	-----	13.3	7.0	-----	13.3	9.1	-----
Open Reduction of Hip Fracture.....	12	25.0	6.3	-----	33.3	11.5	-----	41.7	15.4	-----
Prostatectomy.....	10	0.0	0.6	-----	0.0	1.3	-----	0.0	2.2	-----
Cholecystectomy.....	17	5.9	2.6	-----	5.9	4.6	-----	5.9	5.7	-----
Hysterectomy.....	3	0.0	0.3	-----	0.0	0.7	-----	0.0	1.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SIERRA VISTA COMMUNITY HOSPITAL
Medicare Provider Number: 030043

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 74.6 years
Proportion female..... 55.3 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 50.1 %
Transferred from skilled nursing facility..... 1.6 %
Admitted for elective procedure..... 13.2 %
Admitted for emergency..... 20.5 %

COMORBIDITIES:

Cancer..... 5.8 %
Chronic cardiovascular disease..... 33.3 %
Chronic liver disease..... 0.6 %
Chronic renal disease..... 1.5 %
Chronic pulmonary disease..... 20.0 %
Cerebrovascular degeneration..... 2.7 %
Diabetes mellitus..... 3.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	85.0%
State	5.6%
Outside State	9.4%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.8 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1989

PROFILE:

Total Beds	52
Ownership/Control.....	Private, Non-Profit
Case Mix Index (CMI)	1.1312

STAFFING:

Medical Residents/Interns	0
Registered Nurses.....	44
Licensed Practical Nurses	10

SPECIALTY SERVICES:

Burn Unit	No
Coronary Care Unit	No
Hospice Care	No
Intensive Care Unit	Yes
Organ Transplant	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

SOUTHEAST ARIZONA MEDICAL CENTER

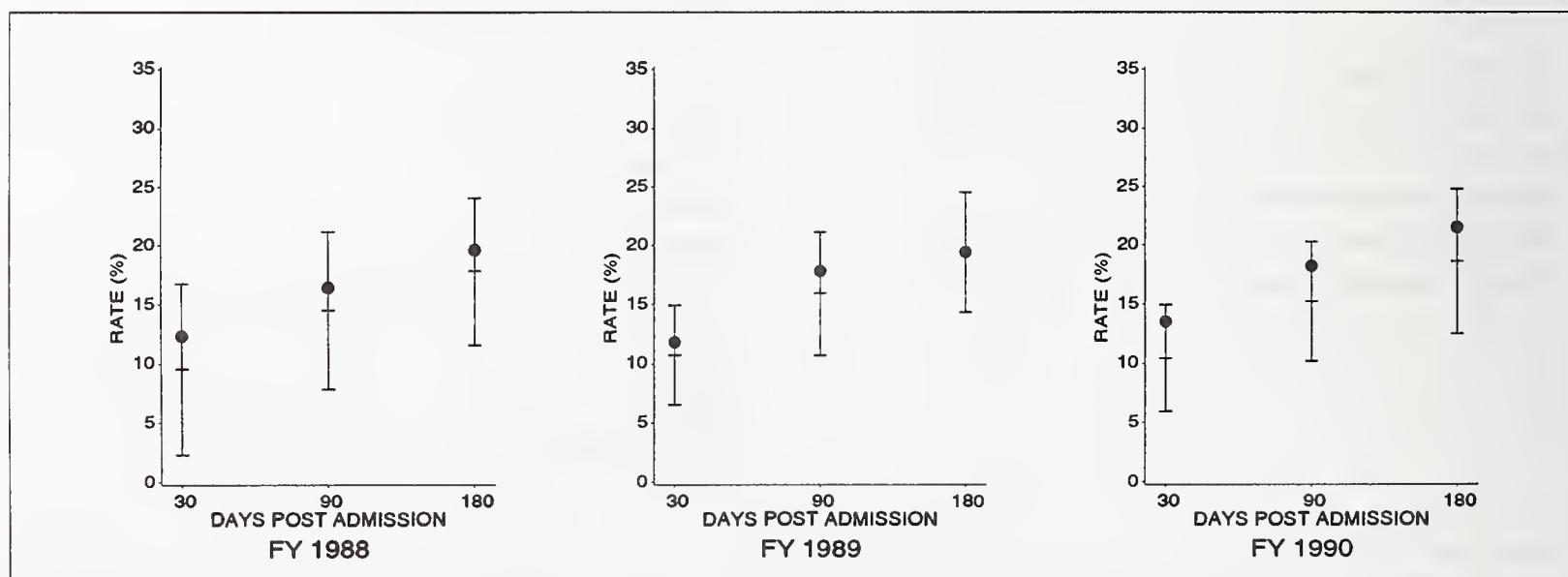
RURAL ROUTE 1, P.O. BOX 30
DOUGLAS, AZ 85607
Medicare Provider Number: 030034

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	303	13.5	10.4	2.3	18.2	15.2	2.5	21.5	18.6	3.1
CONDITIONS:										
Acute Myocardial Infarction.....	5	20.0	24.0	-----	20.0	28.6	-----	20.0	31.4	-----
Congestive Heart Failure.....	24	4.2	14.2	-----	12.5	22.1	-----	20.8	28.3	-----
Pneumonia/Influenza.....	44	13.6	14.6	-----	20.5	19.8	-----	20.5	23.1	-----
Chronic Obstructive Pulmonary Disease.....	14	0.0	4.3	-----	7.1	8.8	-----	21.4	12.3	-----
Transient Cerebral Ischemia.....	0									
Stroke.....	13	61.5	23.9	-----	61.5	30.3	-----	69.2	34.2	-----
Hip Fracture.....	9	22.2	6.6	-----	22.2	11.4	-----	22.2	14.7	-----
Sepsis.....	5	20.0	23.5	-----	40.0	30.1	-----	40.0	34.5	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	6	16.7	6.2	-----	33.3	12.4	-----	33.3	17.0	-----
Open Reduction of Hip Fracture.....	4	25.0	6.6	-----	25.0	10.8	-----	25.0	13.5	-----
Prostatectomy.....	0									
Cholecystectomy.....	18	5.6	2.3	-----	5.6	4.7	-----	5.6	6.8	-----
Hysterectomy.....	2	0.0	0.1	-----	0.0	0.2	-----	0.0	0.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



SOUTHEAST ARIZONA MEDICAL CENTER
Medicare Provider Number: 030034

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	75.9 years
Proportion female.....	49.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	32.3 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	0.0 %
Admitted for emergency.....	66.0 %

COMORBIDITIES:

Cancer.....	2.3 %
Chronic cardiovascular disease.....	15.5 %
Chronic liver disease.....	1.7 %
Chronic renal disease.....	0.3 %
Chronic pulmonary disease.....	16.8 %
Cerebrovascular degeneration.....	1.0 %
Diabetes mellitus.....	5.3 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	91.6%
State	1.6%
Outside State	6.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	5.0 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	75
Occupancy Rate	69.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	30.3 %
Case Mix Index (CMI)	1.1406

STAFFING:

Total Number of Physicians.....	7
Percent of Physicians Board Certified Specialists	85.7 %
Medical Residents/Interns	0
Registered Nurses.....	35
Licensed Practical Nurses	3

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

ST JOSEPHS HOSPITAL & HEALTH CENTER

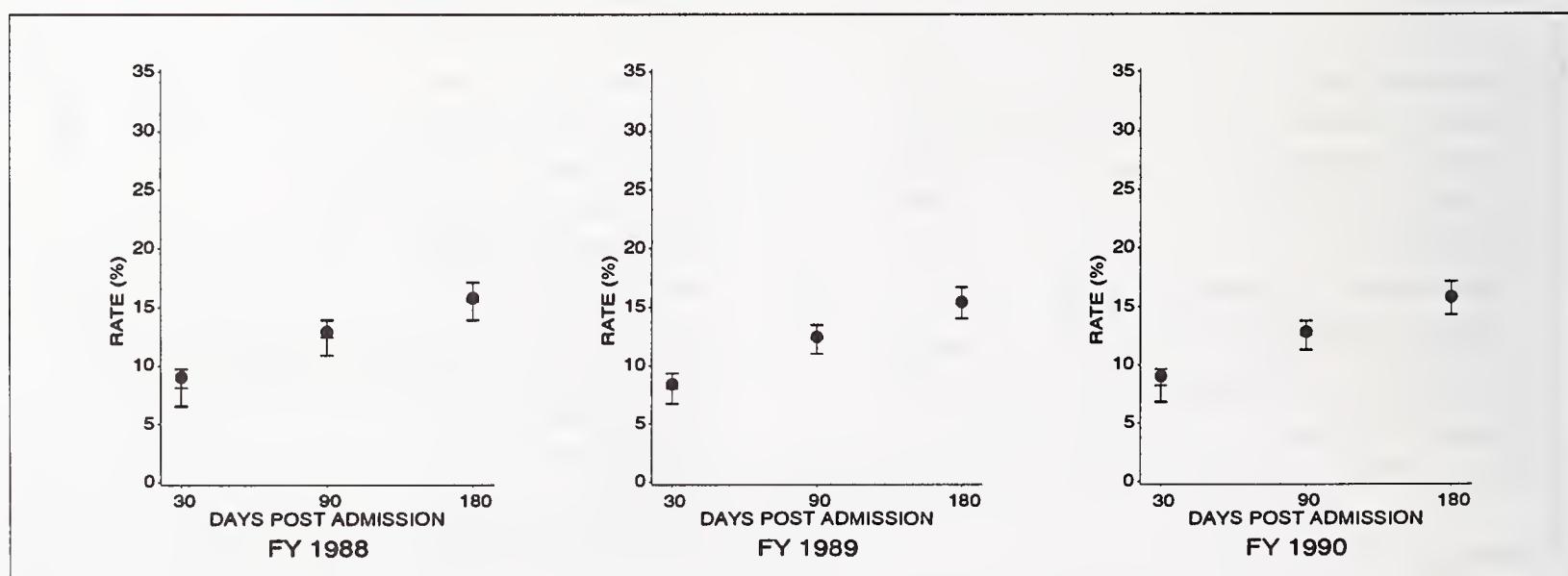
350 NORTH WILMOT RD
TUCSON, AZ 85711
Medicare Provider Number: 030011

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	3165	9.0	8.2	0.7	12.8	12.5	0.6	15.8	15.7	0.7
CONDITIONS:										
Acute Myocardial Infarction.....	102	19.6	24.8	6.4	21.6	27.8	6.5	24.5	30.3	6.1
Congestive Heart Failure.....	118	17.8	14.8	4.0	23.7	23.3	4.2	28.8	29.1	5.6
Pneumonia/Influenza.....	152	13.8	14.4	3.1	19.1	19.8	4.5	22.4	23.4	4.1
Chronic Obstructive Pulmonary Disease.....	56	10.7	6.7	4.5	19.6	12.1	7.2	25.0	16.2	8.3
Transient Cerebral Ischemia.....	30	3.3	2.5	-----	3.3	5.8	-----	6.7	9.1	-----
Stroke.....	98	22.4	20.1	5.4	32.7	27.3	8.0	35.7	31.2	8.7
Hip Fracture.....	130	3.8	5.8	4.0	7.7	10.6	5.4	9.2	14.1	5.8
Sepsis.....	30	30.0	31.2	-----	30.0	40.3	-----	36.7	45.5	-----
PROCEDURES:										
Angioplasty.....	26	0.0	4.3	-----	0.0	5.4	-----	0.0	6.4	-----
Coronary Artery Bypass Graft.....	27	14.8	6.5	-----	18.5	8.6	-----	18.5	9.3	-----
Initial Pacemaker Insertion.....	16	0.0	3.4	-----	0.0	5.9	-----	0.0	7.8	-----
Carotid Endarterectomy.....	14	0.0	1.5	-----	0.0	2.6	-----	0.0	3.6	-----
Hip Replacement/Reconstruction.....	64	3.1	3.5	3.3	6.3	6.7	4.3	6.3	9.2	4.4
Open Reduction of Hip Fracture.....	69	2.9	5.5	3.9	5.8	10.6	6.9	7.2	14.4	8.9
Prostatectomy.....	287	0.3	0.5	0.4	2.1	1.3	1.0	3.1	2.3	1.2
Cholecystectomy.....	78	2.6	1.9	1.6	2.6	3.6	3.1	6.4	5.1	3.2
Hysterectomy.....	33	0.0	0.5	-----	0.0	1.1	-----	0.0	1.9	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST JOSEPHS HOSPITAL & HEALTH CENTER
 Medicare Provider Number: 030011

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 74.9 years

Proportion female..... 52.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 61.4 %

Transferred from skilled nursing facility..... 0.2 %

Admitted for elective procedure..... 28.8 %

Admitted for emergency..... 44.6 %

COMORBIDITIES:

Cancer..... 7.6 %

Chronic cardiovascular disease..... 27.6 %

Chronic liver disease..... 0.9 %

Chronic renal disease..... 2.3 %

Chronic pulmonary disease..... 12.9 %

Cerebrovascular degeneration..... 3.5 %

Diabetes mellitus..... 6.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 84.2%

State 8.7%

Outside State 7.1%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 6.3 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 303

Occupancy Rate 64.0 %

Ownership/Control..... Church

Medicare Discharges 42.2 %

Case Mix Index (CMI) 1.2948

STAFFING:

Total Number of Physicians..... 493

Percent of Physicians Board Certified Specialists(Not Available)

Medical Residents/Interns 0

Registered Nurses..... 217

Licensed Practical Nurses..... 27

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care Yes

Comprehensive Geriatric No

Hospice Care Yes

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant Yes

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug Yes

Rehabilitation Yes

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

ST JOSEPHS HOSPITAL MEDICAL CENTER

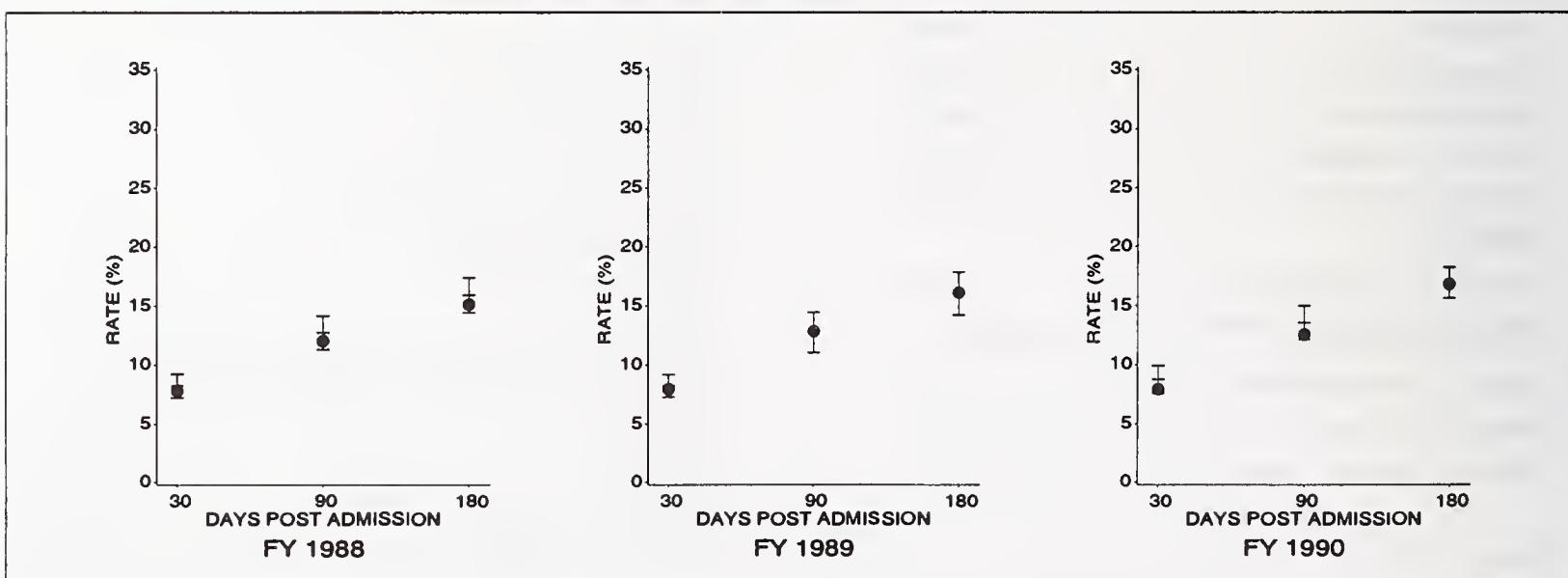
350 WEST THOMAS ROAD
PHOENIX, AZ 85013
Medicare Provider Number: 030024

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	3733	7.9	8.7	0.6	12.5	13.5	0.7	16.8	16.9	0.7
CONDITIONS:										
Acute Myocardial Infarction.....	70	22.9	26.5	6.2	30.0	29.3	5.8	32.9	31.8	6.4
Congestive Heart Failure.....	117	14.5	13.8	3.6	20.5	22.0	4.2	25.6	27.8	4.5
Pneumonia/Influenza.....	95	9.5	12.0	5.7	12.6	17.0	5.6	16.8	20.1	6.2
Chronic Obstructive Pulmonary Disease.....	61	9.8	8.0	3.6	14.8	14.5	7.2	26.2	19.1	7.0
Transient Cerebral Ischemia.....	44	0.0	1.4	-----	4.5	3.1	-----	11.4	5.1	-----
Stroke.....	150	18.0	24.3	5.3	25.3	30.2	4.6	31.3	33.7	4.2
Hip Fracture.....	75	2.7	6.1	3.6	10.7	11.4	4.3	13.3	15.3	5.4
Sepsis.....	32	25.0	27.1	-----	34.4	34.6	-----	37.5	39.1	-----
PROCEDURES:										
Angioplasty.....	19	5.3	4.1	-----	5.3	5.9	-----	5.3	7.6	-----
Coronary Artery Bypass Graft.....	43	4.7	4.1	-----	4.7	6.0	-----	4.7	6.9	-----
Initial Pacemaker Insertion.....	42	0.0	2.6	-----	0.0	5.1	-----	0.0	7.3	-----
Carotid Endarterectomy.....	27	7.4	1.4	-----	7.4	2.6	-----	7.4	3.7	-----
Hip Replacement/Reconstruction.....	66	1.5	2.2	1.9	4.5	4.3	3.0	6.1	6.1	4.3
Open Reduction of Hip Fracture.....	47	4.3	6.0	-----	12.8	11.8	-----	14.9	16.3	-----
Prostatectomy.....	138	0.0	0.8	1.0	0.7	1.9	1.6	2.9	3.4	2.1
Cholecystectomy.....	80	5.0	3.0	2.6	10.0	5.7	4.5	11.2	7.7	4.7
Hysterectomy.....	44	0.0	0.9	-----	0.0	2.0	-----	2.3	3.2	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST JOSEPHS HOSPITAL MEDICAL CENTER
Medicare Provider Number: 030024

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	72.3 years
Proportion female.....	55.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	53.5 %
Transferred from skilled nursing facility.....	1.9 %
Admitted for elective procedure.....	32.5 %
Admitted for emergency.....	40.9 %

COMORBIDITIES:

Cancer.....	10.1 %
Chronic cardiovascular disease.....	23.5 %
Chronic liver disease.....	1.0 %
Chronic renal disease.....	2.6 %
Chronic pulmonary disease.....	12.3 %
Cerebrovascular degeneration.....	3.8 %
Diabetes mellitus.....	6.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	80.3%
State	12.8%
Outside State	6.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	8.5 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	590
Occupancy Rate	75.0 %
Ownership/Control.....	Church
Medicare Discharges	(Not Available)
Case Mix Index (CMI)	1.5210

STAFFING:

Total Number of Physicians.....	585
Percent of Physicians Board Certified Specialists.....	89.7 %
Medical Residents/Interns	108
Registered Nurses.....	973
Licensed Practical Nurses.....	138

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care.....	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	Yes
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug.....	No
Rehabilitation.....	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

ST LUKES MEDICAL CENTER

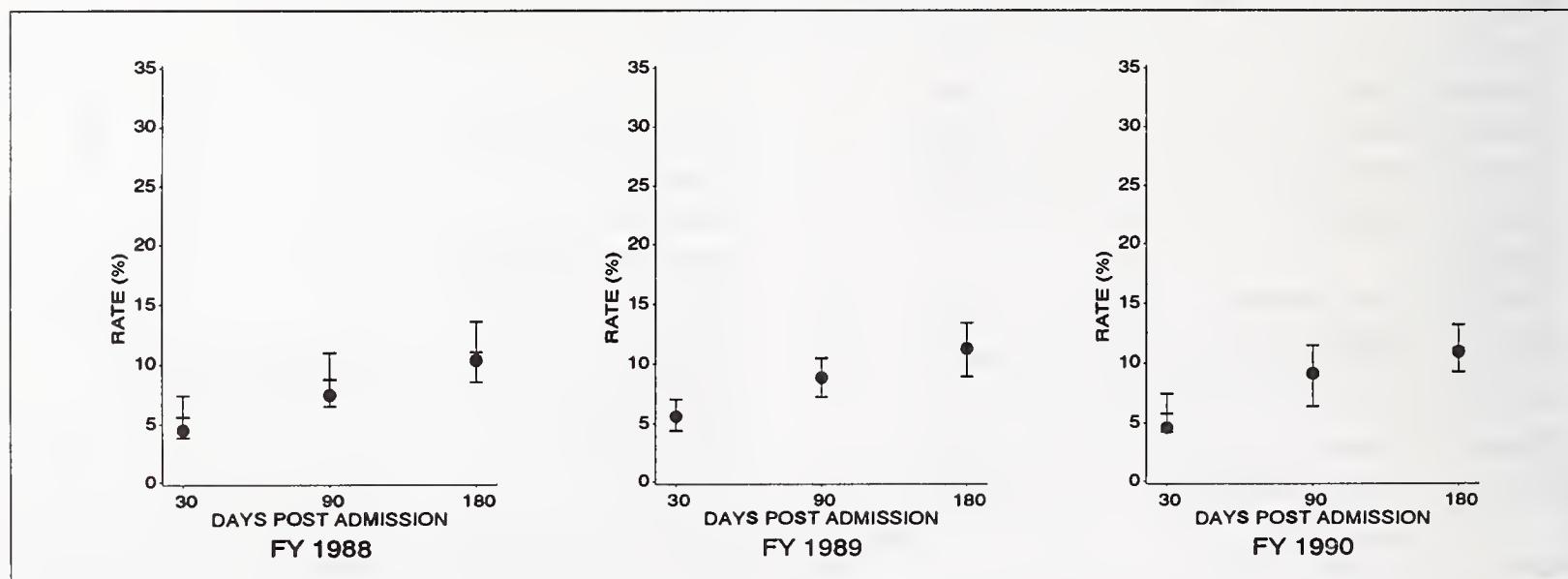
1800 EAST VAN BUREN
PHOENIX, AZ 85006
Medicare Provider Number: 030037

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1336	4.6	5.8	0.8	9.1	8.9	1.3	10.9	11.2	1.0
CONDITIONS:										
Acute Myocardial Infarction.....	32	18.8	20.2	-----	21.9	23.0	-----	21.9	25.3	-----
Congestive Heart Failure.....	35	2.9	11.9	-----	11.4	18.9	-----	14.3	24.3	-----
Pneumonia/Influenza.....	34	11.8	13.6	-----	14.7	18.9	-----	17.6	22.3	-----
Chronic Obstructive Pulmonary Disease.....	15	20.0	10.1	-----	26.7	17.2	-----	26.7	22.1	-----
Transient Cerebral Ischemia.....	13	0.0	1.7	-----	0.0	3.7	-----	0.0	5.7	-----
Stroke.....	25	4.0	20.8	-----	16.0	27.0	-----	16.0	30.3	-----
Hip Fracture.....	25	0.0	4.3	-----	8.0	7.8	-----	8.0	10.3	-----
Sepsis.....	6	50.0	31.0	-----	50.0	39.2	-----	50.0	43.6	-----
PROCEDURES:										
Angioplasty.....	43	2.3	2.3	-----	7.0	3.5	-----	7.0	4.6	-----
Coronary Artery Bypass Graft.....	59	11.9	5.7	4.2	20.3	8.5	5.8	23.7	9.6	6.4
Initial Pacemaker Insertion.....	17	0.0	1.6	-----	0.0	3.3	-----	0.0	5.0	-----
Carotid Endarterectomy.....	5	0.0	1.9	-----	0.0	3.3	-----	0.0	4.5	-----
Hip Replacement/Reconstruction.....	122	1.6	0.7	1.5	2.5	1.3	1.8	2.5	1.8	1.9
Open Reduction of Hip Fracture.....	15	0.0	3.7	-----	6.7	7.1	-----	6.7	9.7	-----
Prostatectomy.....	9	0.0	0.8	-----	11.1	1.7	-----	22.2	3.0	-----
Cholecystectomy.....	22	0.0	0.9	-----	0.0	1.6	-----	0.0	2.2	-----
Hysterectomy.....	2	0.0	1.1	-----	0.0	2.2	-----	0.0	3.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST LUKES MEDICAL CENTER
Medicare Provider Number: 030037

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 71.9 years
Proportion female..... 55.5 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 63.7 %
Transferred from skilled nursing facility..... 0.1 %
Admitted for elective procedure..... 51.7 %
Admitted for emergency..... 28.4 %

COMORBIDITIES:

Cancer.....	3.7 %
Chronic cardiovascular disease.....	34.6 %
Chronic liver disease.....	1.9 %
Chronic renal disease.....	2.5 %
Chronic pulmonary disease.....	16.1 %
Cerebrovascular degeneration.....	2.8 %
Diabetes mellitus.....	5.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	70.1%
State	20.2%
Outside State	9.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	7.3 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	228
Occupancy Rate	61.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	35.1 %
Case Mix Index (CMI)	1.7239

STAFFING:

Total Number of Physicians.....	214
Percent of Physicians Board Certified Specialists	84.6 %
Medical Residents/Interns	(Not Available)
Registered Nurses.....	(Not Available)
Licensed Practical Nurses	(Not Available)

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

ST MARYS HOSPITAL HEALTH CENTER

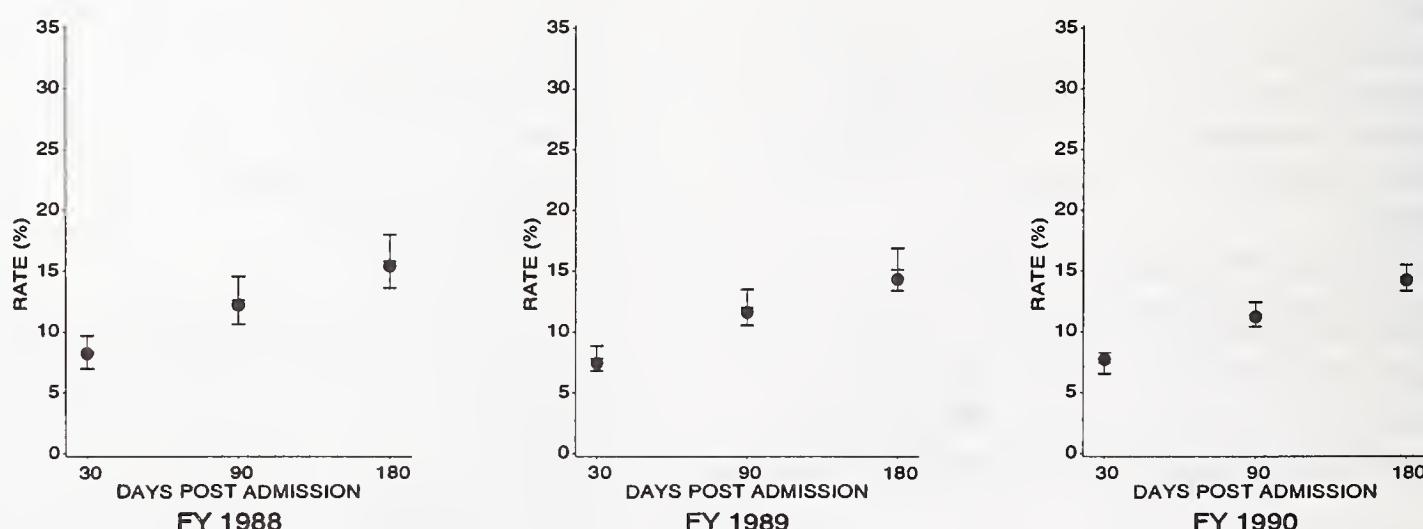
1601 WEST ST. MARYS RD
TUCSON, AZ 85745
Medicare Provider Number: 030010

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	4364	7.7	7.4	0.4	11.2	11.4	0.5	14.2	14.4	0.5
CONDITIONS:										
Acute Myocardial Infarction.....	175	21.7	21.2	3.1	26.3	24.3	3.6	29.1	26.9	4.1
Congestive Heart Failure.....	150	8.0	13.9	3.6	14.0	22.1	4.8	17.3	28.2	5.3
Pneumonia/Influenza.....	134	14.2	14.6	3.7	17.9	20.2	4.5	20.1	23.9	4.8
Chronic Obstructive Pulmonary Disease.....	85	2.4	6.7	3.7	9.4	12.1	3.9	16.5	16.2	4.2
Transient Cerebral Ischemia.....	46	2.2	1.6	-----	4.3	3.6	-----	4.3	5.7	-----
Stroke.....	146	22.6	18.5	5.3	27.4	24.3	4.7	30.1	27.9	4.3
Hip Fracture.....	114	4.4	5.4	2.7	7.9	10.0	4.6	10.5	13.3	5.4
Sepsis.....	49	12.2	21.4	-----	12.2	27.3	-----	24.5	31.3	-----
PROCEDURES:										
Angioplasty.....	112	4.5	4.1	2.3	4.5	5.2	2.2	5.4	6.2	2.4
Coronary Artery Bypass Graft.....	86	17.4	6.7	4.1	24.4	9.9	5.3	25.6	11.3	5.3
Initial Pacemaker Insertion.....	21	9.5	2.9	-----	9.5	5.4	-----	9.5	7.6	-----
Carotid Endarterectomy.....	9	0.0	1.6	-----	0.0	2.9	-----	0.0	4.2	-----
Hip Replacement/Reconstruction.....	95	1.1	2.0	2.1	3.2	3.8	2.8	5.3	5.2	2.8
Open Reduction of Hip Fracture.....	71	7.0	5.1	3.4	9.9	9.9	3.5	12.7	13.6	4.2
Prostatectomy.....	171	0.6	0.8	0.8	1.2	1.8	1.3	1.2	3.1	2.1
Cholecystectomy.....	91	4.4	1.8	2.3	5.5	3.3	3.2	5.5	4.5	4.2
Hysterectomy.....	12	0.0	1.1	-----	0.0	2.7	-----	8.3	4.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



ST MARYS HOSPITAL HEALTH CENTER

Medicare Provider Number: 030010

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	73.5 years
Proportion female.....	52.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	50.2 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	26.2 %
Admitted for emergency.....	4.7 %

COMORBIDITIES:

Cancer.....	5.9 %
Chronic cardiovascular disease.....	33.7 %
Chronic liver disease.....	1.2 %
Chronic renal disease.....	4.6 %
Chronic pulmonary disease.....	15.5 %
Cerebrovascular degeneration.....	2.5 %
Diabetes mellitus.....	9.1 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	81.9%
State	9.4%
Outside State	8.7%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.9 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	326
Occupancy Rate	73.0 %
Ownership/Control.....	Church
Medicare Discharges	53.2 %
Case Mix Index (CMI)	1.3717

STAFFING:

Total Number of Physicians.....	221
Percent of Physicians Board Certified Specialists.....	75.6 %
Medical Residents/Interns	0
Registered Nurses.....	387
Licensed Practical Nurses	27

SPECIALTY SERVICES:

Burn Unit	Yes
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	Yes
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	Yes
Psychiatric	Yes
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

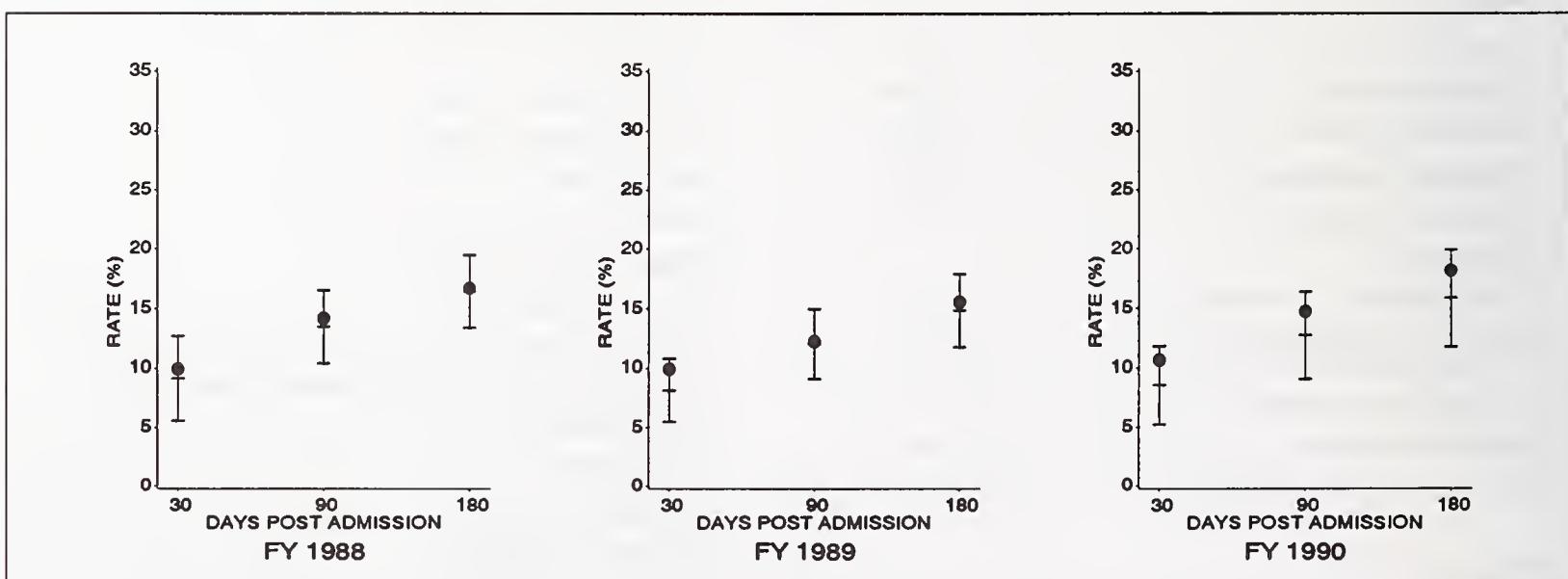
TEMPE ST. LUKES HOSPITAL
 1500 SOUTH MILL AVENUE
 TEMPE, AZ 85281
 Medicare Provider Number: 030019

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	509	10.6	8.5	1.7	14.7	12.7	1.8	18.1	15.8	2.0
CONDITIONS:										
Acute Myocardial Infarction.....	14	50.0	22.2	-----	50.0	24.4	-----	50.0	26.6	-----
Congestive Heart Failure.....	30	10.0	12.1	-----	16.7	18.7	-----	26.7	23.5	-----
Pneumonia/Influenza.....	37	8.1	12.8	-----	10.8	17.5	-----	13.5	20.6	-----
Chronic Obstructive Pulmonary Disease.....	7	14.3	6.0	-----	14.3	11.2	-----	28.6	15.0	-----
Transient Cerebral Ischemia.....	6	0.0	1.1	-----	0.0	2.5	-----	33.3	4.0	-----
Stroke.....	27	18.5	20.1	-----	25.9	27.6	-----	25.9	31.3	-----
Hip Fracture.....	17	5.9	5.9	-----	23.5	10.6	-----	23.5	13.9	-----
Sepsis.....	3	33.3	13.8	-----	33.3	18.0	-----	33.3	21.3	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	5	0.0	3.4	-----	0.0	6.3	-----	0.0	8.5	-----
Carotid Endarterectomy.....	4	0.0	1.3	-----	0.0	2.8	-----	0.0	4.3	-----
Hip Replacement/Reconstruction.....	5	20.0	5.5	-----	60.0	10.8	-----	60.0	15.1	-----
Open Reduction of Hip Fracture.....	9	0.0	5.8	-----	11.1	10.1	-----	11.1	13.1	-----
Prostatectomy.....	10	0.0	0.4	-----	0.0	1.0	-----	0.0	1.8	-----
Cholecystectomy.....	16	6.3	3.9	-----	12.5	7.4	-----	12.5	9.7	-----
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



TEMPE ST. LUKES HOSPITAL
Medicare Provider Number: 030019

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	74.8 years
Proportion female.....	57.6 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	43.0 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	18.9 %
Admitted for emergency.....	56.2 %

COMORBIDITIES:

Cancer.....	4.3 %
Chronic cardiovascular disease.....	38.3 %
Chronic liver disease.....	2.2 %
Chronic renal disease.....	1.6 %
Chronic pulmonary disease.....	15.1 %
Cerebrovascular degeneration.....	5.1 %
Diabetes mellitus.....	6.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	85.5%
State	5.4%
Outside State	9.1%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.2 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	110
Occupancy Rate	33.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	25.2 %
Case Mix Index (CMI)	1.2075

STAFFING:

Total Number of Physicians.....	95
Percent of Physicians Board Certified Specialists	68.4 %
Medical Residents/Interns	0
Registered Nurses.....	55
Licensed Practical Nurses	5

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

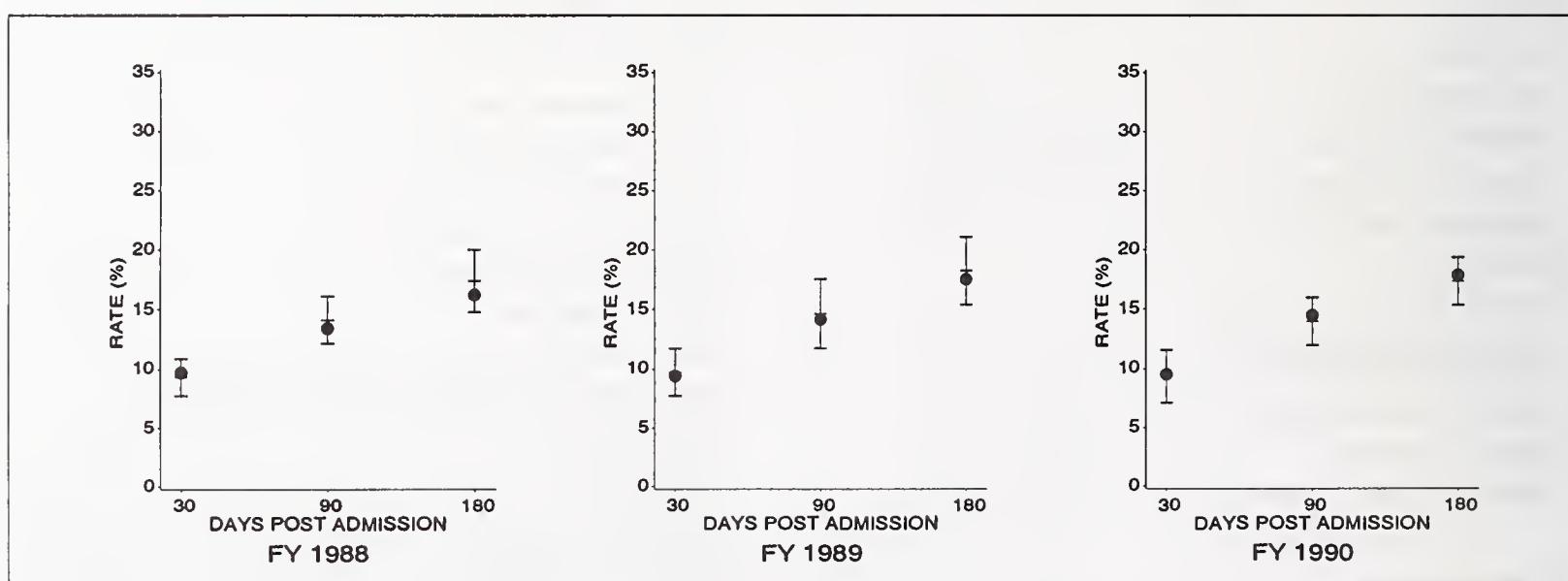
THUNDERBIRD SAMARITAN HOSP & HLTH CENTER
 5555 WEST THUNDERBIRD ROAD
 GLENDALE, AZ 85306
 Medicare Provider Number: 030089

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1714	9.5	9.3	1.1	14.4	13.9	1.0	17.8	17.3	1.0
CONDITIONS:										
Acute Myocardial Infarction.....	54	31.5	27.0	6.9	35.2	29.6	7.1	35.2	32.2	6.8
Congestive Heart Failure.....	94	17.0	14.6	5.1	24.5	23.2	4.6	29.8	29.5	5.2
Pneumonia/Influenza.....	96	19.8	17.3	4.7	24.0	23.4	4.6	26.0	27.2	4.8
Chronic Obstructive Pulmonary Disease.....	44	11.4	6.7	-----	11.4	11.7	-----	18.2	15.5	-----
Transient Cerebral Ischemia.....	23	0.0	1.5	-----	0.0	3.3	-----	0.0	5.3	-----
Stroke.....	68	26.5	19.7	6.9	33.8	25.7	7.5	36.8	29.2	7.1
Hip Fracture.....	47	6.4	6.6	-----	12.8	11.7	-----	17.0	15.0	-----
Sepsis.....	18	33.3	28.2	-----	38.9	37.8	-----	50.0	42.9	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	9	0.0	3.9	-----	11.1	8.0	-----	11.1	11.4	-----
Carotid Endarterectomy.....	6	0.0	1.5	-----	0.0	3.0	-----	0.0	4.4	-----
Hip Replacement/Reconstruction.....	19	5.3	5.5	-----	5.3	9.9	-----	10.5	13.0	-----
Open Reduction of Hip Fracture.....	27	3.7	4.9	-----	14.8	9.1	-----	18.5	11.9	-----
Prostatectomy.....	70	0.0	0.7	1.2	0.0	1.6	2.3	1.4	2.9	2.6
Cholecystectomy.....	42	2.4	2.7	-----	2.4	5.1	-----	2.4	7.1	-----
Hysterectomy.....	20	0.0	0.2	-----	0.0	0.6	-----	0.0	1.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



THUNDERBIRD SAMARITAN HOSP & HLTH CENTER
 Medicare Provider Number: 030089

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 73.5 years
 Proportion female..... 56.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 41.5 %
 Transferred from skilled nursing facility..... 0.1 %
 Admitted for elective procedure..... 13.3 %
 Admitted for emergency..... 85.2 %

COMORBIDITIES:

Cancer.....	7.5 %
Chronic cardiovascular disease.....	31.4 %
Chronic liver disease.....	0.9 %
Chronic renal disease.....	4.8 %
Chronic pulmonary disease.....	15.2 %
Cerebrovascular degeneration.....	3.0 %
Diabetes mellitus.....	8.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	88.4%
State	3.3%
Outside State	8.3%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.8 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	235
Occupancy Rate	55.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	26.3 %
Case Mix Index (CMI)	1.2199

STAFFING:

Total Number of Physicians.....	667
Percent of Physicians Board Certified Specialists	66.6 %
Medical Residents/Interns	0
Registered Nurses.....	211
Licensed Practical Nurses	51

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care.....	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

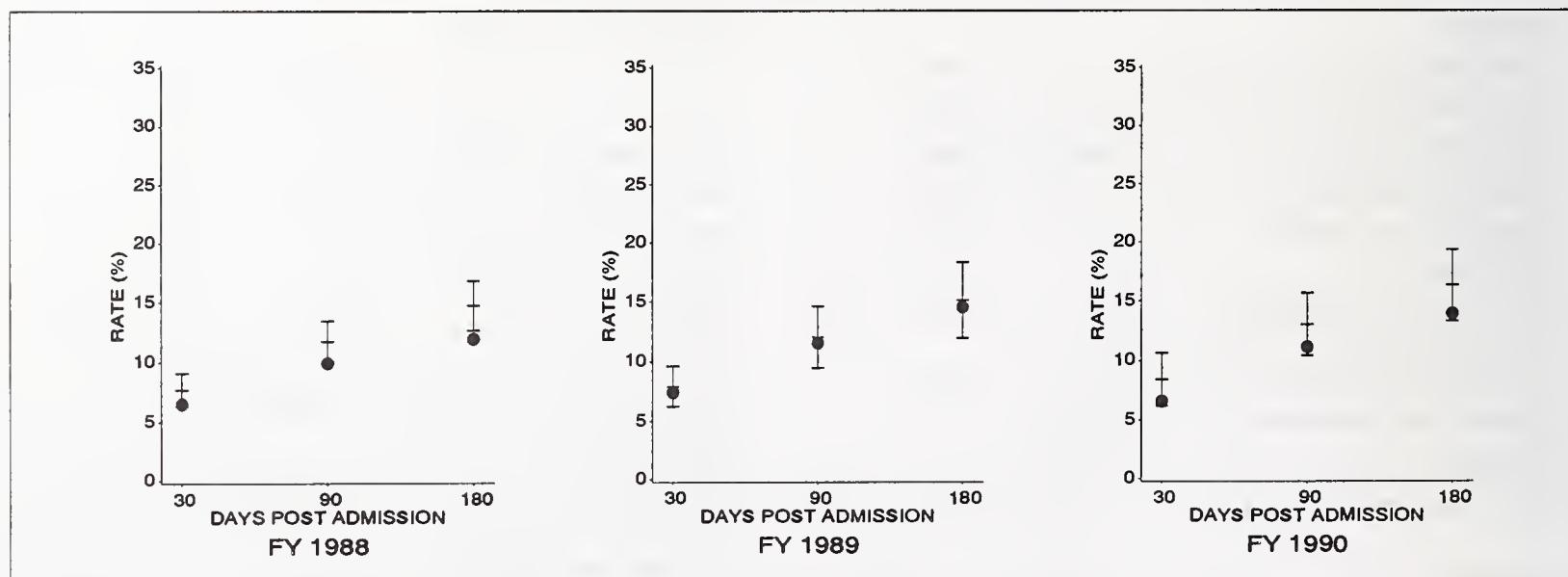
TUCSON GENERAL HOSPITAL
 3838 NORTH CAMPBELL AVENUE
 TUCSON, AZ 85719
 Medicare Provider Number: 030035

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1385	6.6	8.4	1.1	11.1	13.0	1.3	13.9	16.3	1.5
CONDITIONS:										
Acute Myocardial Infarction.....	33	33.3	25.2	-----	36.4	29.3	-----	36.4	32.2	-----
Congestive Heart Failure.....	67	6.0	14.5	7.5	14.9	22.8	10.1	19.4	28.7	9.0
Pneumonia/Influenza.....	55	5.5	13.3	9.0	10.9	18.6	9.7	14.5	21.9	10.1
Chronic Obstructive Pulmonary Disease.....	28	3.6	8.1	-----	7.1	13.7	-----	14.3	17.6	-----
Transient Cerebral Ischemia.....	19	0.0	1.3	-----	5.3	3.1	-----	10.5	5.3	-----
Stroke.....	56	17.9	20.3	9.5	19.6	28.1	11.9	21.4	32.5	12.9
Hip Fracture.....	31	9.7	7.7	-----	12.9	13.5	-----	16.1	17.4	-----
Sepsis.....	22	9.1	26.4	-----	13.6	33.6	-----	13.6	37.7	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	8	0.0	2.1	-----	0.0	4.0	-----	0.0	6.0	-----
Carotid Endarterectomy.....	2	0.0	1.2	-----	0.0	2.2	-----	0.0	3.2	-----
Hip Replacement/Reconstruction.....	22	9.1	4.1	-----	13.6	7.4	-----	18.2	9.8	-----
Open Reduction of Hip Fracture.....	19	10.5	7.0	-----	10.5	12.7	-----	10.5	16.5	-----
Prostatectomy.....	90	0.0	1.3	1.5	1.1	2.9	2.3	2.2	4.7	3.4
Cholecystectomy.....	32	3.1	3.4	-----	6.3	6.2	-----	6.3	8.1	-----
Hysterectomy.....	12	0.0	0.1	-----	0.0	0.2	-----	0.0	0.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**



TUCSON GENERAL HOSPITAL
Medicare Provider Number: 030035

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 75.2 years

Proportion female..... 54.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 49.5 %

Transferred from skilled nursing facility..... 0.1 %

Admitted for elective procedure..... 19.6 %

Admitted for emergency..... 65.8 %

COMORBIDITIES:

Cancer..... 7.2 %

Chronic cardiovascular disease..... 39.4 %

Chronic liver disease..... 1.0 %

Chronic renal disease..... 2.2 %

Chronic pulmonary disease..... 19.4 %

Cerebrovascular degeneration..... 2.5 %

Diabetes mellitus..... 8.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 85.8%

State 6.1%

Outside State 8.1%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 6.5 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1989

PROFILE:

Total Beds 222

Ownership/Control..... Private, Non-Profit

Case Mix Index (CMI) 1.1845

STAFFING:

Medical Residents/Interns 0

Registered Nurses..... 213

Licensed Practical Nurses 9

SPECIALTY SERVICES:

Burn Unit No

Coronary Care Unit Yes

Hospice Care No

Intensive Care Unit Yes

Organ Transplant No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug Yes

Rehabilitation No

Psychiatric Yes

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

TUCSON MEDICAL CENTER

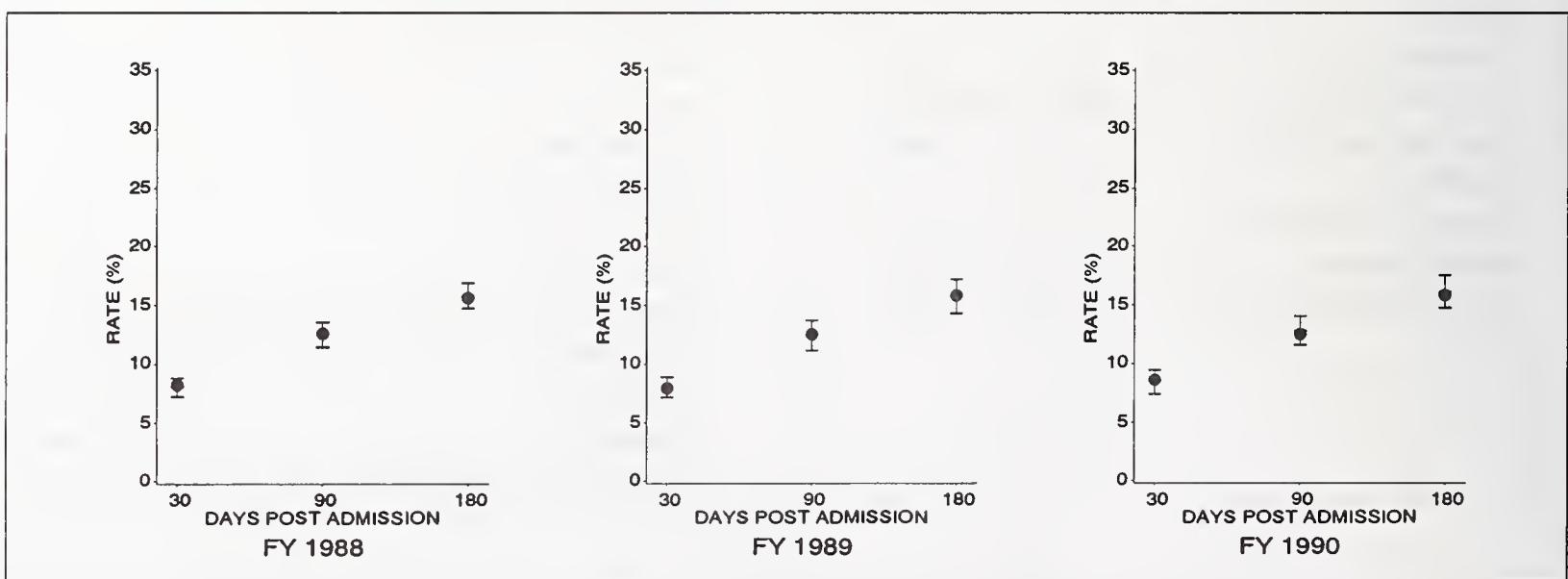
5301 EAST GRANT RD
TUCSON, AZ 85733
Medicare Provider Number: 030006

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	4405	8.6	8.4	0.5	12.5	12.8	0.6	15.8	16.1	0.7
CONDITIONS:										
Acute Myocardial Infarction.....	152	23.7	25.5	5.1	26.3	28.5	5.2	28.9	31.1	4.8
Congestive Heart Failure.....	140	11.4	14.3	3.8	20.0	23.0	4.2	28.6	29.3	3.9
Pneumonia/Influenza.....	140	12.1	14.3	3.2	15.7	19.7	4.1	17.1	23.2	5.0
Chronic Obstructive Pulmonary Disease.....	78	11.5	7.3	3.7	17.9	12.9	5.2	28.2	17.1	7.0
Transient Cerebral Ischemia.....	39	5.1	1.6	-----	7.7	3.6	-----	7.7	6.0	-----
Stroke.....	142	21.1	19.0	4.9	25.4	25.3	4.2	29.6	29.1	4.1
Hip Fracture.....	126	7.1	6.3	2.3	11.1	11.3	3.6	17.5	15.0	4.2
Sepsis.....	53	22.6	23.5	5.8	28.3	30.8	6.5	30.2	35.1	7.3
PROCEDURES:										
Angioplasty.....	64	4.7	4.4	2.6	6.3	5.6	3.1	6.3	6.7	3.2
Coronary Artery Bypass Graft.....	62	16.1	6.8	6.2	16.1	9.5	5.9	16.1	10.6	5.9
Initial Pacemaker Insertion.....	34	2.9	3.0	-----	2.9	5.3	-----	5.9	7.4	-----
Carotid Endarterectomy.....	18	0.0	1.3	-----	0.0	2.4	-----	0.0	3.7	-----
Hip Replacement/Reconstruction.....	130	3.1	2.0	2.2	5.4	3.7	3.5	6.2	5.0	4.3
Open Reduction of Hip Fracture.....	57	8.8	6.3	4.1	12.3	11.4	5.0	19.3	15.3	6.0
Prostatectomy.....	239	0.8	0.9	0.6	1.7	2.1	1.1	3.8	3.5	1.3
Cholecystectomy.....	86	1.2	2.9	2.2	3.5	5.2	3.0	3.5	6.8	3.7
Hysterectomy.....	62	0.0	0.8	1.2	0.0	1.8	2.0	3.2	2.9	2.7

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE ($\pm 2 SD$) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



TUCSON MEDICAL CENTER
Medicare Provider Number: 030006

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 73.5 years
Proportion female..... 53.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 54.9 %
Transferred from skilled nursing facility..... 0.0 %
Admitted for elective procedure..... 31.3 %
Admitted for emergency..... 43.1 %

COMORBIDITIES:

Cancer.....	9.3 %
Chronic cardiovascular disease.....	28.8 %
Chronic liver disease.....	1.0 %
Chronic renal disease.....	2.8 %
Chronic pulmonary disease.....	11.7 %
Cerebrovascular degeneration.....	2.6 %
Diabetes mellitus.....	5.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	73.5%
State	18.7%
Outside State	7.8%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.4 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	500
Occupancy Rate	63.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	33.3 %
Case Mix Index (CMI)	1.4600

STAFFING:

Total Number of Physicians.....	629
Percent of Physicians Board Certified Specialists.....	85.2 %
Medical Residents/Interns	0
Registered Nurses.....	460
Licensed Practical Nurses	37

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	Yes
OTHER SPECIALTY/HOSPITAL-BASED SERVICES:	
Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

UNIVERSITY MEDICAL CENTER CORPORATION

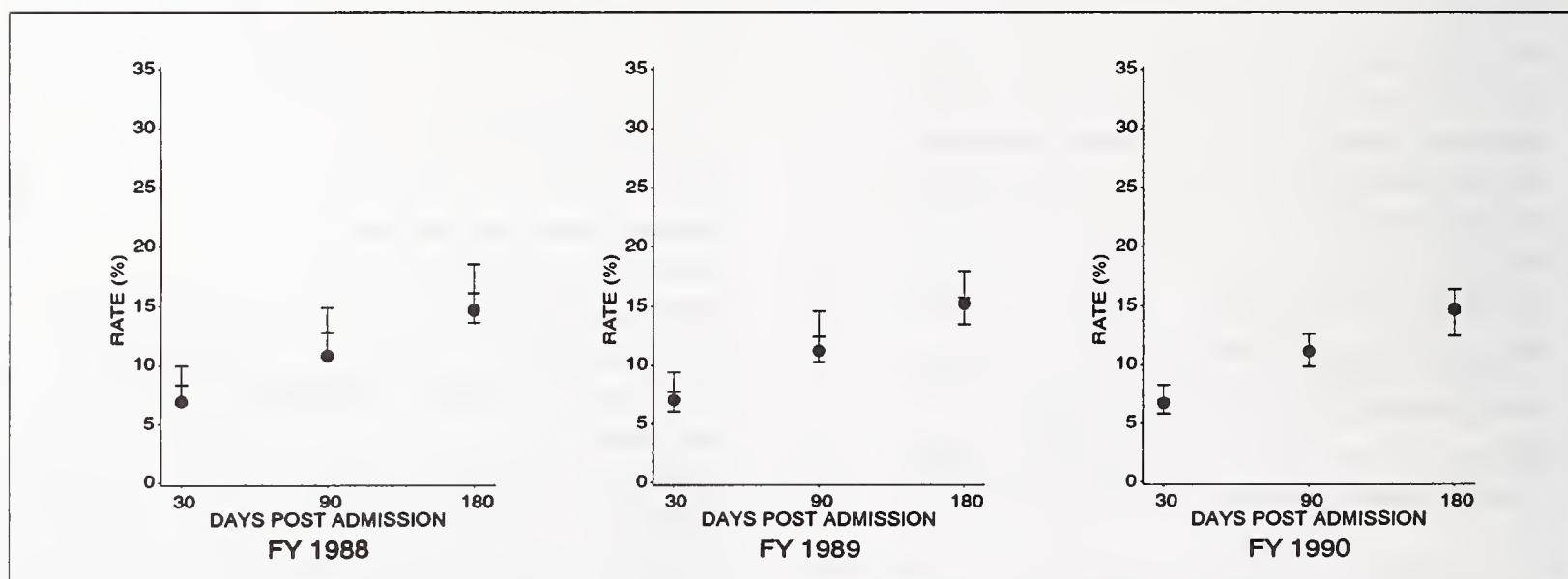
1501 N CAMPBELL AVE
TUCSON, AZ 85724
Medicare Provider Number: 030064

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	2135	6.7	7.0	0.6	11.1	11.2	0.7	14.7	14.4	1.0
CONDITIONS:										
Acute Myocardial Infarction.....	49	12.2	21.4	-----	22.4	24.3	-----	28.6	27.0	-----
Congestive Heart Failure.....	65	13.8	15.1	5.4	21.5	24.6	8.5	30.8	31.1	8.6
Pneumonia/Influenza.....	74	16.2	16.2	4.4	18.9	22.9	5.4	24.3	27.1	5.8
Chronic Obstructive Pulmonary Disease.....	33	6.1	7.1	-----	6.1	12.3	-----	6.1	16.0	-----
Transient Cerebral Ischemia.....	19	0.0	1.6	-----	5.3	3.5	-----	5.3	5.5	-----
Stroke.....	30	13.3	20.6	-----	16.7	27.7	-----	23.3	31.3	-----
Hip Fracture.....	34	5.9	4.5	-----	14.7	8.4	-----	14.7	11.6	-----
Sepsis.....	12	33.3	26.2	-----	41.7	34.8	-----	50.0	39.3	-----
PROCEDURES:										
Angioplasty.....	23	0.0	3.6	-----	0.0	4.5	-----	4.3	5.3	-----
Coronary Artery Bypass Graft.....	38	10.5	6.3	-----	10.5	8.7	-----	13.2	9.8	-----
Initial Pacemaker Insertion.....	14	0.0	4.0	-----	0.0	6.6	-----	0.0	8.9	-----
Carotid Endarterectomy.....	18	0.0	1.6	-----	0.0	3.0	-----	5.6	4.4	-----
Hip Replacement/Reconstruction.....	55	5.5	1.7	3.0	7.3	3.3	4.0	7.3	4.6	5.0
Open Reduction of Hip Fracture.....	9	0.0	4.4	-----	11.1	9.3	-----	11.1	13.4	-----
Prostatectomy.....	47	0.0	0.8	-----	0.0	1.8	-----	2.1	3.2	-----
Cholecystectomy.....	16	0.0	1.9	-----	0.0	3.8	-----	0.0	5.3	-----
Hysterectomy.....	32	0.0	0.3	-----	0.0	0.9	-----	0.0	1.5	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



UNIVERSITY MEDICAL CENTER CORPORATION
Medicare Provider Number: 030064

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	69.3 years
Proportion female.....	47.4 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	44.4 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	25.7 %
Admitted for emergency.....	31.4 %

COMORBIDITIES:

Cancer.....	10.6 %
Chronic cardiovascular disease.....	30.5 %
Chronic liver disease.....	1.2 %
Chronic renal disease.....	3.5 %
Chronic pulmonary disease.....	9.3 %
Cerebrovascular degeneration.....	2.8 %
Diabetes mellitus.....	5.9 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	63.1%
State	23.0%
Outside State	13.9%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	6.4 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	286
Occupancy Rate	76.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	23.0 %
Case Mix Index (CMI)	1.4504

STAFFING:

Total Number of Physicians.....	457
Percent of Physicians Board Certified Specialists	82.3 %
Medical Residents/Interns	0
Registered Nurses.....	531
Licensed Practical Nurses.....	44

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care.....	Yes
Organ/Tissue Transplant	Yes
Other Intensive Care	No
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

VA HOSPITAL
 3601 S 6TH AVE
 TUCSON, AZ 85713
 Medicare Provider Number: 03013F

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	5	0.0	3.0	----	0.0	5.1	----	0.0	7.0	----
CONDITIONS:										
Acute Myocardial Infarction.....		0								
Congestive Heart Failure.....		0								
Pneumonia/Influenza.....		0								
Chronic Obstructive Pulmonary Disease.....		0								
Transient Cerebral Ischemia.....		0								
Stroke.....		0								
Hip Fracture.....		0								
Sepsis.....		0								
PROCEDURES:										
Angioplasty.....		0								
Coronary Artery Bypass Graft.....		0								
Initial Pacemaker Insertion.....		0								
Carotid Endarterectomy.....		0								
Hip Replacement/Reconstruction.....		0								
Open Reduction of Hip Fracture.....		0								
Prostatectomy.....		0								
Cholecystectomy.....		0								
Hysterectomy.....		0								

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

**OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD)
FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES**

No Graphs are presented when the standard deviation was not computed for one or more of the three fiscal years, (1988, 1989, or 1990)

VA HOSPITAL
Medicare Provider Number: 03013F

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	34.2 years
Proportion female.....	60.0 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	0.0 %
Transferred from skilled nursing facility.....	0.0 %
Admitted for elective procedure.....	0.0 %
Admitted for emergency.....	0.0 %

COMORBIDITIES:

Cancer.....	0.0 %
Chronic cardiovascular disease.....	0.0 %
Chronic liver disease.....	0.0 %
Chronic renal disease.....	40.0 %
Chronic pulmonary disease.....	0.0 %
Cerebrovascular degeneration.....	0.0 %
Diabetes mellitus.....	0.0 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	85.7%
State	14.3%
Outside State	0.0%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	10.5 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year Unknown

PROFILE:

Total Beds	381
Ownership/Control.....	(Not Available)
Case Mix Index (CMI)	1.2233

STAFFING:

Medical Residents/Interns	0
Registered Nurses.....	0
Licensed Practical Nurses	0

SPECIALTY SERVICES:

Burn Unit	Yes
Coronary Care Unit	Yes
Hospice Care	Yes
Intensive Care Unit	Yes
Organ Transplant	Yes
Trauma Center	Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	Yes
Rehabilitation.....	Yes
Psychiatric	Yes
Medicare Swing Beds	N/A

** Except for CMI

* Not used in calculating mortality rates

VALLEY LUTHERAN HOSPITAL

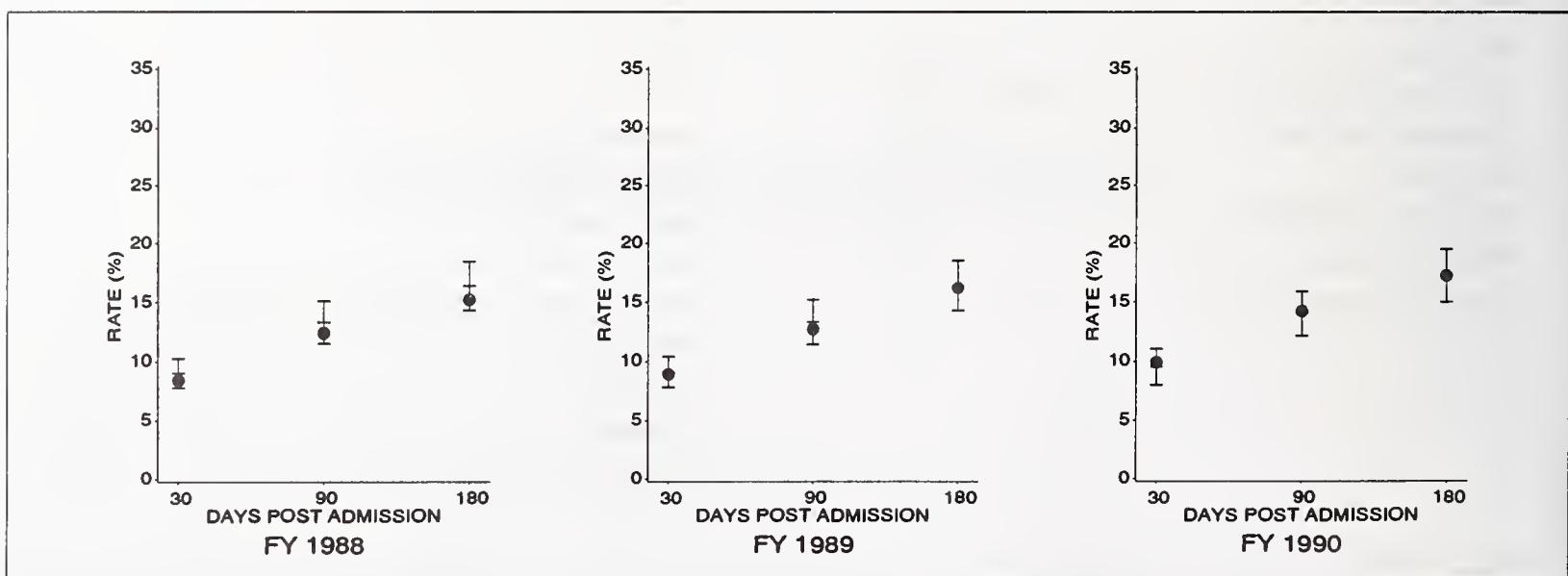
6644 BAYWOOD AVE
MESA, AZ 85206
Medicare Provider Number: 030088

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	3314	9.9	9.5	0.8	14.2	14.0	0.9	17.2	17.2	1.1
CONDITIONS:										
Acute Myocardial Infarction.....	159	25.2	25.4	3.9	30.8	28.6	4.8	32.7	31.1	4.5
Congestive Heart Failure.....	153	19.0	14.1	4.2	24.8	22.3	4.0	30.7	28.4	3.9
Pneumonia/Influenza.....	227	15.4	17.1	4.2	20.3	23.4	5.5	24.7	27.6	5.0
Chronic Obstructive Pulmonary Disease.....	60	6.7	6.1	3.1	11.7	10.9	6.2	21.7	14.8	9.0
Transient Cerebral Ischemia.....	28	3.6	1.5	-----	7.1	3.4	-----	10.7	5.6	-----
Stroke.....	139	19.4	20.1	3.6	25.9	26.5	3.8	30.2	29.9	4.2
Hip Fracture.....	111	2.7	5.9	2.8	4.5	10.5	4.0	7.2	13.7	4.6
Sepsis.....	38	31.6	26.4	-----	36.8	34.2	-----	39.5	38.8	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	12	0.0	2.3	-----	16.7	4.7	-----	16.7	6.9	-----
Carotid Endarterectomy.....	1	0.0	0.6	-----	0.0	1.1	-----	0.0	1.5	-----
Hip Replacement/Reconstruction.....	106	0.9	2.5	2.6	2.8	4.7	4.0	3.8	6.2	4.4
Open Reduction of Hip Fracture.....	57	1.8	5.5	3.6	3.5	10.5	5.3	7.0	14.1	6.3
Prostatectomy.....	146	2.1	0.9	1.2	3.4	2.1	1.6	5.5	3.6	2.2
Cholecystectomy.....	116	1.7	2.5	2.1	3.4	4.5	3.2	3.4	5.8	3.4
Hysterectomy.....	35	0.0	0.6	-----	0.0	1.5	-----	0.0	2.4	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



VALLEY LUTHERAN HOSPITAL
Medicare Provider Number: 030088

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 75.3 years

Proportion female..... 49.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 39.5 %

Transferred from skilled nursing facility..... 0.0 %

Admitted for elective procedure..... 19.3 %

Admitted for emergency..... 59.8 %

COMORBIDITIES:

Cancer..... 6.9 %

Chronic cardiovascular disease..... 33.8 %

Chronic liver disease..... 0.5 %

Chronic renal disease..... 2.4 %

Chronic pulmonary disease..... 17.9 %

Cerebrovascular degeneration..... 2.7 %

Diabetes mellitus..... 5.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 57.8%

State 16.6%

Outside State 25.6%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 6.8 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 120

Occupancy Rate 82.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 73.7 %

Case Mix Index (CMI) 1.2790

STAFFING:

Total Number of Physicians..... 162

Percent of Physicians Board Certified Specialists..... 82.7 %

Medical Residents/Interns 0

Registered Nurses..... 136

Licensed Practical Nurses 18

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric No

Hospice Care Yes

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

VALLEY VIEW COMMUNITY HOSPITAL

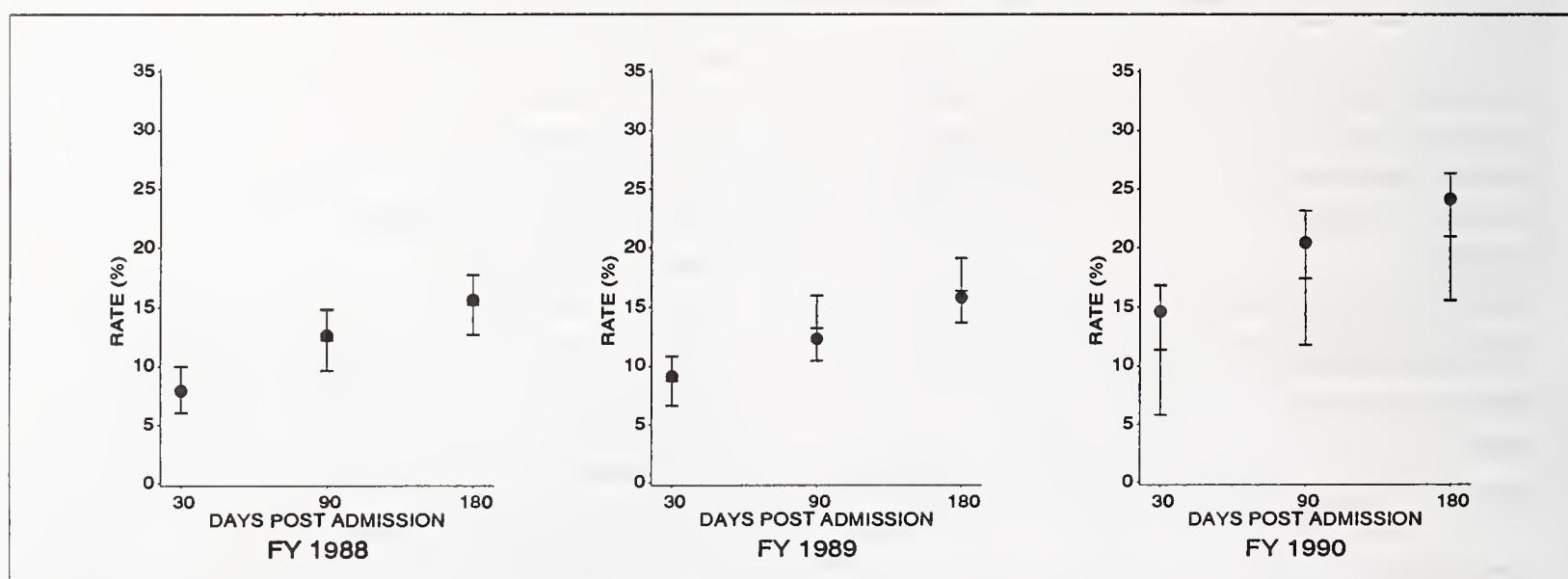
12207 113TH AVENUE
YOUNGTOWN, AZ 85363
Medicare Provider Number: 030057

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	323	14.6	11.3	2.8	20.4	17.4	2.9	24.1	20.9	2.7
CONDITIONS:										
Acute Myocardial Infarction.....	10	20.0	23.1	-----	20.0	26.0	-----	20.0	28.1	-----
Congestive Heart Failure.....	18	50.0	20.0	-----	55.6	31.4	-----	55.6	37.2	-----
Pneumonia/Influenza.....	29	13.8	19.3	-----	20.7	26.6	-----	24.1	30.1	-----
Chronic Obstructive Pulmonary Disease.....	5	20.0	10.9	-----	40.0	19.2	-----	40.0	24.0	-----
Transient Cerebral Ischemia.....	4	0.0	1.7	-----	0.0	3.9	-----	0.0	6.2	-----
Stroke.....	12	25.0	22.7	-----	33.3	31.4	-----	33.3	35.2	-----
Hip Fracture.....	11	0.0	6.2	-----	0.0	11.4	-----	18.2	14.5	-----
Sepsis.....	4	25.0	24.2	-----	50.0	35.0	-----	50.0	39.9	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	2	0.0	3.6	-----	0.0	7.5	-----	0.0	10.5	-----
Carotid Endarterectomy.....	1	0.0	0.9	-----	0.0	1.7	-----	0.0	2.4	-----
Hip Replacement/Reconstruction.....	12	0.0	2.9	-----	0.0	5.4	-----	0.0	7.1	-----
Open Reduction of Hip Fracture.....	4	0.0	5.2	-----	0.0	10.7	-----	25.0	14.4	-----
Prostatectomy.....	11	0.0	0.9	-----	0.0	2.2	-----	0.0	3.9	-----
Cholecystectomy.....	4	0.0	2.1	-----	0.0	3.7	-----	0.0	4.4	-----
Hysterectomy.....	2	0.0	1.9	-----	0.0	3.8	-----	0.0	5.1	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE ($\pm 2 SD$) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



VALLEY VIEW COMMUNITY HOSPITAL
Medicare Provider Number: 030057

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 77.8 years

Proportion female..... 50.8 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 35.9 %

Transferred from skilled nursing facility..... 0.0 %

Admitted for elective procedure..... 0.3 %

Admitted for emergency..... 63.8 %

COMORBIDITIES:

Cancer..... 4.0 %

Chronic cardiovascular disease..... 34.7 %

Chronic liver disease..... 0.0 %

Chronic renal disease..... 0.9 %

Chronic pulmonary disease..... 18.0 %

Cerebrovascular degeneration..... 9.9 %

Diabetes mellitus..... 6.2 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 92.3%

State 1.4%

Outside State 6.3%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 7.6 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1987

PROFILE:

Total Beds 104

Ownership/Control..... Private, Non-Profit

Case Mix Index (CMI) 1.1831

STAFFING:

Medical Residents/Interns 0

Registered Nurses..... 37

Licensed Practical Nurses 4

SPECIALTY SERVICES:

Burn Unit No

Coronary Care Unit Yes

Hospice Care No

Intensive Care Unit Yes

Organ Transplant No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric Yes

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

WALTER O BOSWELL MEMORIAL HOSPITAL

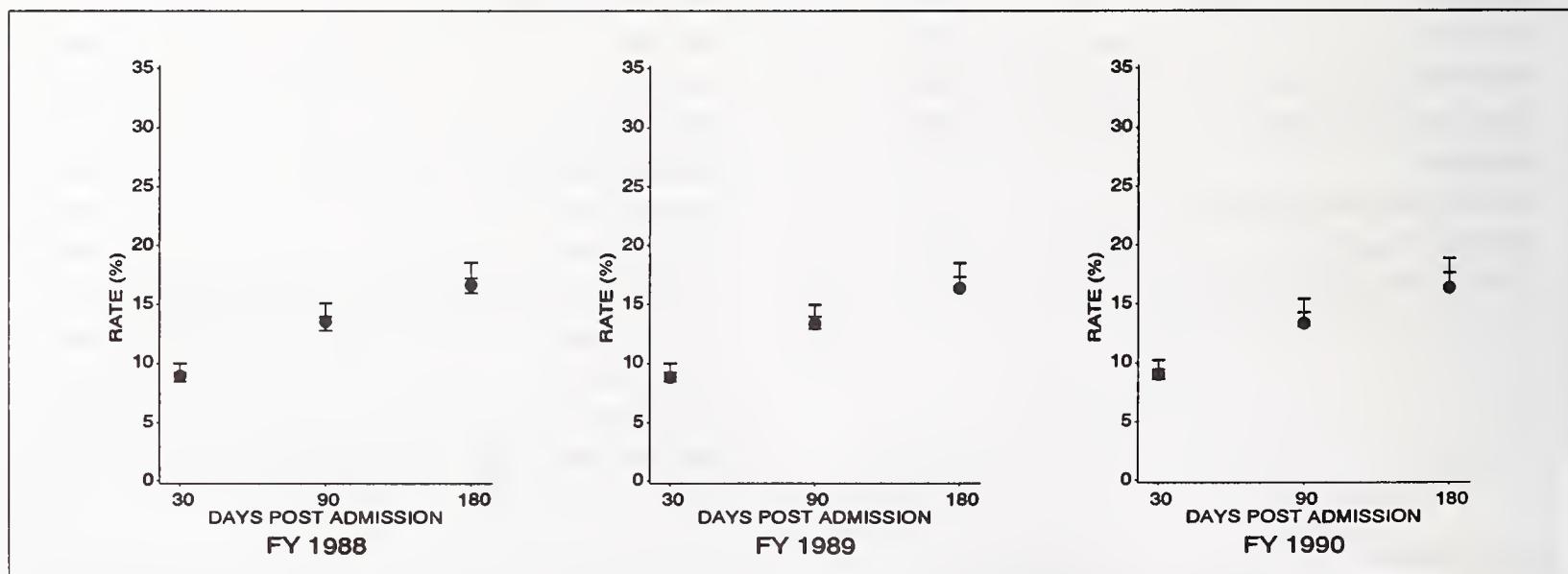
10401 THUNDERBIRD BLVD
SUN CITY, AZ 85351
Medicare Provider Number: 030061

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	7147	9.0	9.4	0.4	13.3	14.2	0.6	16.3	17.6	0.6
CONDITIONS:										
Acute Myocardial Infarction.....	239	27.2	28.5	3.2	29.7	31.7	3.7	33.1	34.4	4.6
Congestive Heart Failure.....	339	17.1	14.4	3.1	23.6	22.4	2.5	29.5	28.2	3.0
Pneumonia/Influenza.....	252	20.2	16.6	2.7	24.2	22.8	2.7	26.2	26.8	3.2
Chronic Obstructive Pulmonary Disease.....	107	16.8	10.6	5.2	24.3	17.7	5.6	29.9	22.5	6.7
Transient Cerebral Ischemia.....	106	3.8	1.9	1.6	3.8	4.3	2.0	3.8	6.8	2.9
Stroke.....	310	21.3	24.2	3.6	28.4	31.0	4.5	30.6	34.9	4.6
Hip Fracture.....	250	6.4	7.2	1.7	10.8	12.5	2.9	12.8	16.1	3.7
Sepsis.....	93	17.2	21.7	6.0	26.9	29.3	5.3	32.3	34.0	5.3
PROCEDURES:										
Angioplasty.....	192	3.6	3.9	1.6	3.6	4.8	1.8	4.7	5.7	1.9
Coronary Artery Bypass Graft.....	81	7.4	6.0	2.9	8.6	8.4	3.2	8.6	9.4	3.4
Initial Pacemaker Insertion.....	86	5.8	3.1	3.1	7.0	5.8	3.9	11.6	8.2	4.3
Carotid Endarterectomy.....	45	0.0	1.8	-----	4.4	3.4	-----	8.9	4.9	-----
Hip Replacement/Reconstruction.....	217	3.2	3.4	1.4	6.0	6.2	2.1	6.5	8.2	2.2
Open Reduction of Hip Fracture.....	135	5.9	7.0	2.4	11.9	12.6	3.4	14.8	16.4	3.8
Prostatectomy.....	322	0.9	0.9	0.8	2.8	2.1	1.2	4.3	3.6	1.6
Cholecystectomy.....	152	2.6	3.1	1.9	3.9	5.7	2.9	5.9	7.8	3.8
Hysterectomy.....	56	1.8	0.8	1.7	3.6	1.8	3.0	3.6	2.9	3.1

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE ($\pm 2 SD$) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WALTER O BOSWELL MEMORIAL HOSPITAL
 Medicare Provider Number: 030061

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission.....	77.3 years	Cancer.....	7.7 %
Proportion female.....	50.9 %	Chronic cardiovascular disease.....	37.4 %
ADMISSION SOURCES/TYPES:		Chronic liver disease.....	
Referred by personal or HMO physician.....	50.7 %	Chronic renal disease.....	0.9 %
Transferred from skilled nursing facility.....	0.1 %	Chronic pulmonary disease.....	1.7 %
Admitted for elective procedure.....	26.6 %	Cerebrovascular degeneration.....	14.4 %
Admitted for emergency.....	48.6 %	Diabetes mellitus.....	3.2 %
			4.5 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:		MEDICARE AVERAGE LENGTH OF STAY:	
County/City	92.2%	Hospital	7.2 Days
State	1.9%	State	6.8 Days
Outside State	5.9%	National	8.6 Days
Total	100.0%		

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990	
PROFILE:	
Total Beds	325
Occupancy Rate	73.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	86.8 %
Case Mix Index (CMI)	1.4047
STAFFING:	
Total Number of Physicians.....	140
Percent of Physicians Board Certified Specialists	86.4 %
Medical Residents/Interns	0
Registered Nurses.....	253
Licensed Practical Nurses.....	53
SPECIALTY SERVICES:	
Burn Unit	No
Cardiac Intensive Care	Yes
Comprehensive Geriatric	Yes
Hospice Care	No
Medical/Surgical Intensive Care	Yes
Organ/Tissue Transplant	No
Other Intensive Care	No
Trauma Center	No
OTHER SPECIALTY/HOSPITAL-BASED SERVICES:	
Alcohol/Drug.....	No
Rehabilitation.....	Yes
Psychiatric	No
Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

WHITE MOUNTAIN COMMUNITIES HOSPITAL

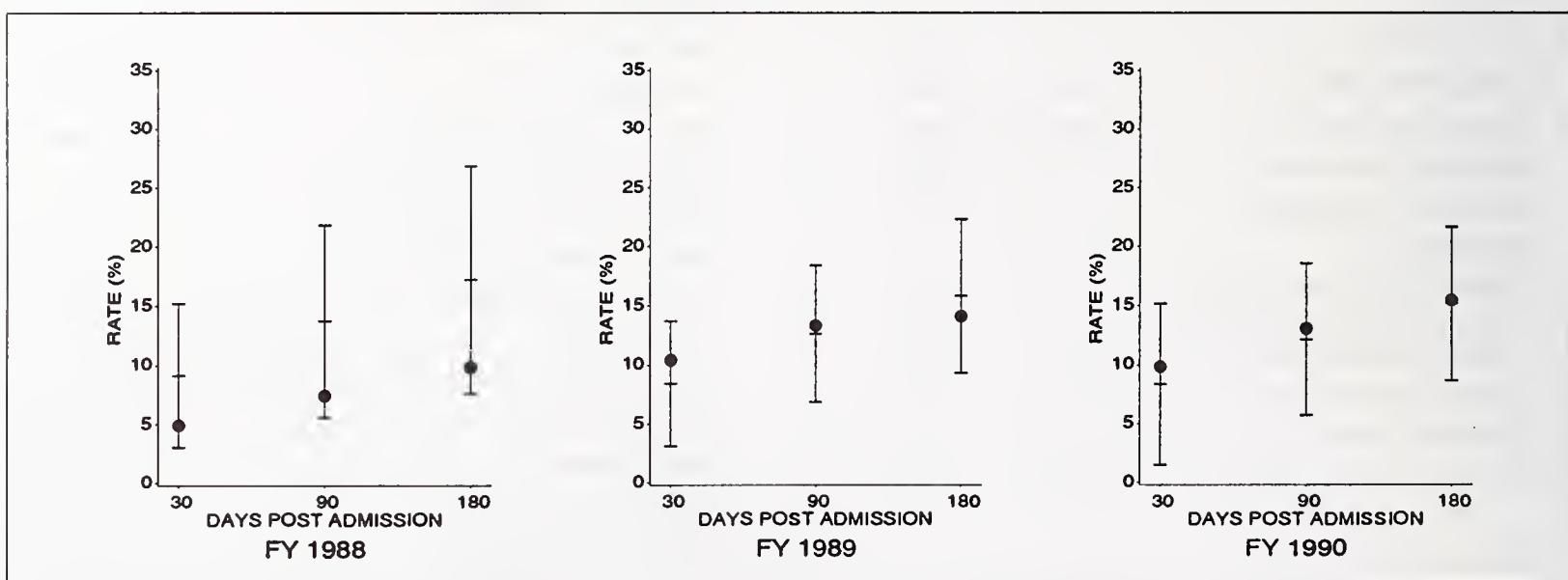
118 SOUTH MOUNTAIN AVENUE
SPRINGERVILLE, AZ 85938
Medicare Provider Number: 030046

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	123	9.8	8.3	3.4	13.0	12.1	3.2	15.4	15.1	3.3
CONDITIONS:										
Acute Myocardial Infarction.....	6	16.7	14.8	-----	16.7	17.0	-----	16.7	19.2	-----
Congestive Heart Failure.....	9	0.0	12.4	-----	11.1	19.9	-----	11.1	24.8	-----
Pneumonia/Influenza.....	10	30.0	13.0	-----	30.0	17.8	-----	30.0	21.6	-----
Chronic Obstructive Pulmonary Disease.....	2	0.0	6.7	-----	0.0	11.0	-----	0.0	15.1	-----
Transient Cerebral Ischemia.....	2	0.0	2.3	-----	0.0	4.8	-----	0.0	7.5	-----
Stroke.....	4	50.0	27.3	-----	50.0	35.3	-----	75.0	41.5	-----
Hip Fracture.....	1	0.0	3.4	-----	0.0	6.1	-----	0.0	8.0	-----
Sepsis.....	1	100.0	85.4	-----	100.0	93.3	-----	100.0	94.8	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	1	0.0	1.2	-----	0.0	1.8	-----	0.0	2.4	-----
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	5	0.0	0.6	-----	0.0	1.2	-----	0.0	1.7	-----
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WHITE MOUNTAIN COMMUNITIES HOSPITAL
Medicare Provider Number: 030046

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 74.2 years

Proportion female..... 56.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 35.0 %

Transferred from skilled nursing facility..... 0.8 %

Admitted for elective procedure..... 8.1 %

Admitted for emergency..... 9.8 %

COMORBIDITIES:

Cancer..... 1.6 %

Chronic cardiovascular disease..... 39.8 %

Chronic liver disease..... 0.8 %

Chronic renal disease..... 3.3 %

Chronic pulmonary disease..... 26.0 %

Cerebrovascular degeneration..... 5.7 %

Diabetes mellitus..... 9.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 73.4%

State 11.5%

Outside State 15.1%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 3.8 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: Health Care Financing Administration (OSCAR)** - Survey Year 1991

PROFILE:

Total Beds 25

Ownership/Control..... Private, Non-Profit

Case Mix Index (CMI) 1.0077

STAFFING:

Medical Residents/Interns 1

Registered Nurses..... 11

Licensed Practical Nurses 3

SPECIALTY SERVICES:

Burn Unit No

Coronary Care Unit No

Hospice Care No

Intensive Care Unit No

Organ Transplant No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

WICKENBURG COMMUNITY HOSPITAL

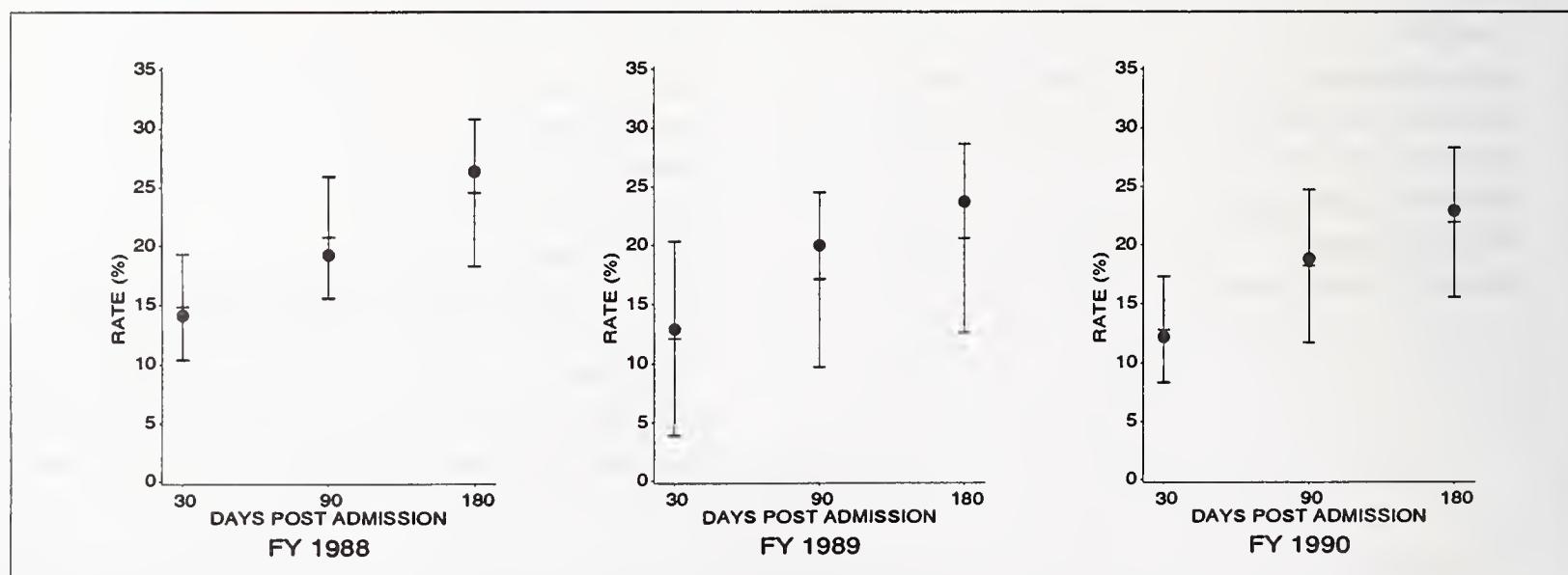
520 ROSE LANE
WICKENBURG, AZ 85358
Medicare Provider Number: 030025

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	271	12.2	12.8	2.3	18.8	18.2	3.3	22.9	21.9	3.2
CONDITIONS:										
Acute Myocardial Infarction.....	20	40.0	29.1	-----	60.0	32.2	-----	60.0	35.0	-----
Congestive Heart Failure.....	9	22.2	12.8	-----	33.3	20.5	-----	44.4	26.2	-----
Pneumonia/Influenza.....	35	11.4	12.4	-----	22.9	17.6	-----	25.7	20.9	-----
Chronic Obstructive Pulmonary Disease.....	1	0.0	23.5	-----	0.0	37.9	-----	0.0	48.6	-----
Transient Cerebral Ischemia.....	1	0.0	0.6	-----	0.0	1.4	-----	0.0	2.5	-----
Stroke.....	11	0.0	17.2	-----	0.0	22.3	-----	0.0	25.6	-----
Hip Fracture.....	0									
Sepsis.....	6	16.7	29.0	-----	16.7	34.4	-----	16.7	40.2	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	5	0.0	0.8	-----	0.0	1.5	-----	0.0	2.1	-----
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WICKENBURG COMMUNITY HOSPITAL
Medicare Provider Number: 030025

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission.....	76.4 years
Proportion female.....	50.9 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.....	36.9 %
Transferred from skilled nursing facility.....	1.8 %
Admitted for elective procedure.....	0.0 %
Admitted for emergency.....	0.0 %

COMORBIDITIES:

Cancer.....	7.0 %
Chronic cardiovascular disease.....	42.4 %
Chronic liver disease.....	0.7 %
Chronic renal disease.....	0.7 %
Chronic pulmonary disease.....	23.6 %
Cerebrovascular degeneration.....	1.5 %
Diabetes mellitus.....	6.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City	69.9%
State	18.9%
Outside State	11.2%
Total	100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital	4.3 Days
State	6.8 Days
National	8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds	78
Occupancy Rate	74.0 %
Ownership/Control.....	Private, Non-Profit
Medicare Discharges	63.9 %
Case Mix Index (CMI)	1.1563

STAFFING:

Total Number of Physicians.....	6
Percent of Physicians Board Certified Specialists	33.3 %
Medical Residents/Interns	0
Registered Nurses.....	11
Licensed Practical Nurses	0

SPECIALTY SERVICES:

Burn Unit	No
Cardiac Intensive Care	No
Comprehensive Geriatric	No
Hospice Care	No
Medical/Surgical Intensive Care.....	No
Organ/Tissue Transplant	No
Other Intensive Care	Yes
Trauma Center	No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug	No
Rehabilitation.....	No
Psychiatric	No
Medicare Swing Beds	Yes

** Except for CMI

* Not used in calculating mortality rates

WINSLOW MEMORIAL HOSPITAL

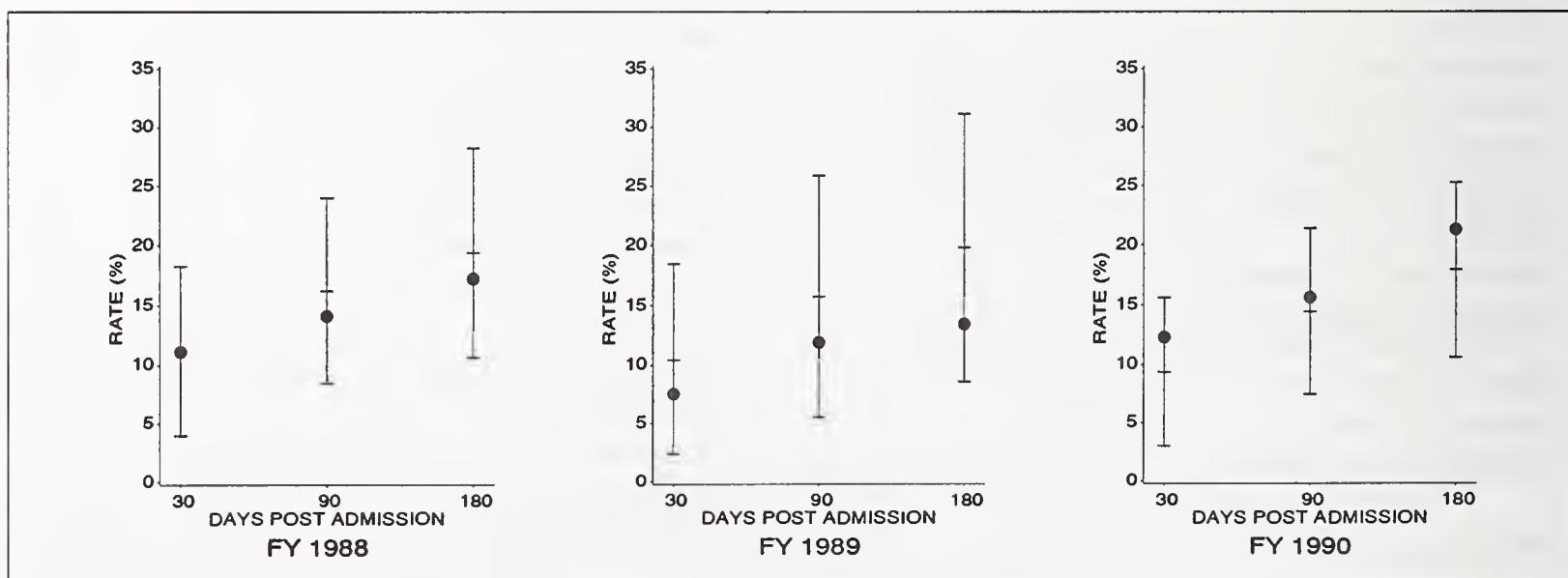
1501 WILLIAMSON AVE
WINSLOW, AZ 86047
Medicare Provider Number: 030044

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	122	12.3	9.3	3.1	15.6	14.4	3.5	21.3	17.9	3.7
CONDITIONS:										
Acute Myocardial Infarction.....	2	50.0	25.7	-----	50.0	27.9	-----	50.0	30.0	-----
Congestive Heart Failure.....	8	12.5	15.0	-----	12.5	23.3	-----	25.0	29.2	-----
Pneumonia/Influenza.....	15	13.3	11.2	-----	13.3	16.1	-----	13.3	19.6	-----
Chronic Obstructive Pulmonary Disease.....	0									
Transient Cerebral Ischemia.....	0									
Stroke.....	1	0.0	10.2	-----	0.0	12.3	-----	0.0	14.6	-----
Hip Fracture.....	0									
Sepsis.....	3	0.0	10.5	-----	0.0	14.5	-----	0.0	18.7	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	0									
Carotid Endarterectomy.....	0									
Hip Replacement/Reconstruction.....	0									
Open Reduction of Hip Fracture.....	0									
Prostatectomy.....	0									
Cholecystectomy.....	9	0.0	1.6	-----	0.0	2.8	-----	11.1	3.6	-----
Hysterectomy.....	0									

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE ($\pm 2 SD$) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



WINSLOW MEMORIAL HOSPITAL

Medicare Provider Number: 030044

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 74.1 years

Proportion female..... 58.2 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician.... 27.0 %

Transferred from skilled nursing facility..... 1.6 %

Admitted for elective procedure..... 0.0 %

Admitted for emergency..... 63.9 %

COMORBIDITIES:

Cancer..... 4.1 %

Chronic cardiovascular disease..... 28.7 %

Chronic liver disease..... 0.0 %

Chronic renal disease..... 5.7 %

Chronic pulmonary disease..... 18.0 %

Cerebrovascular degeneration..... 3.3 %

Diabetes mellitus..... 9.8 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 83.8%

State 13.1%

Outside State 3.1%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 4.8 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 42

Occupancy Rate 26.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 21.1 %

Case Mix Index (CMI) 1.0982

STAFFING:

Total Number of Physicians..... 10

Percent of Physicians Board Certified Specialists..... 70.0 %

Medical Residents/Interns 0

Registered Nurses..... 18

Licensed Practical Nurses..... 2

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric No

Hospice Care No

Medical/Surgical Intensive Care No

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center No

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric No

Medicare Swing Beds Yes

** Except for CMI

* Not used in calculating mortality rates

YAVAPAI REGIONAL MEDICAL CENTER

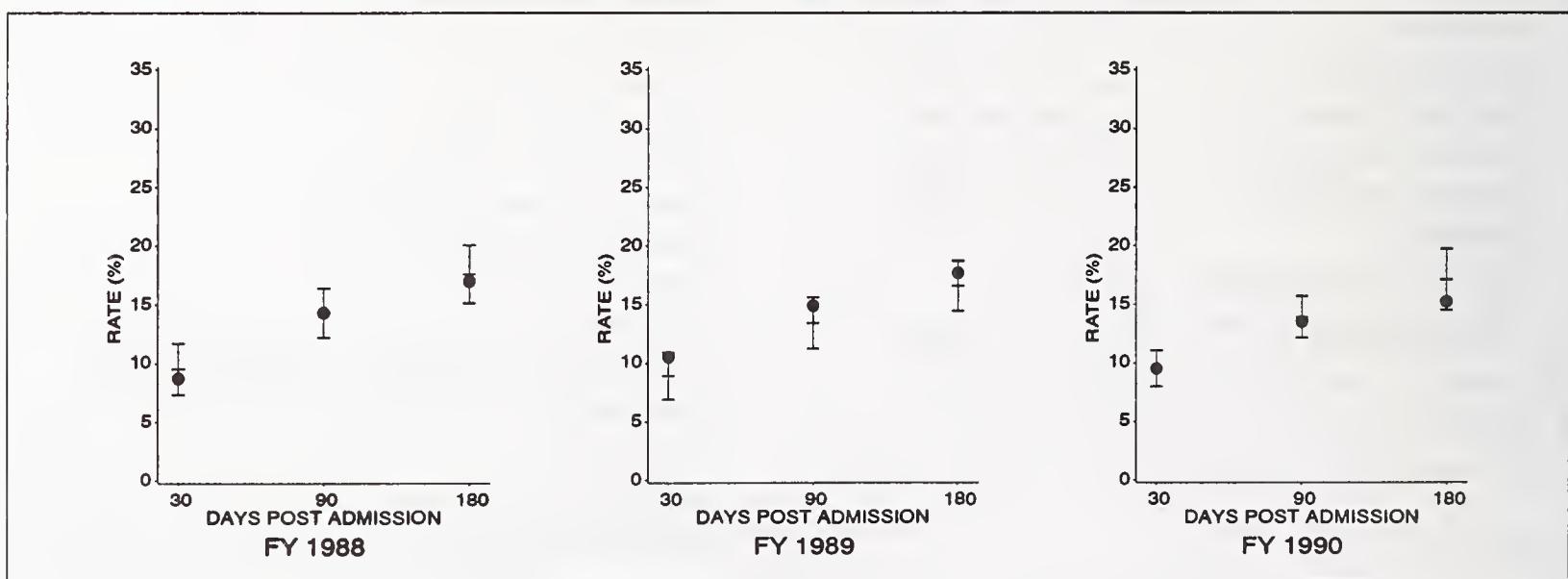
1003 WILLOW CREEK ROAD
PRESCOTT, AZ 86301
Medicare Provider Number: 030012

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	1543	9.5	9.5	0.8	13.5	13.9	0.9	15.2	17.1	1.3
CONDITIONS:										
Acute Myocardial Infarction.....	77	19.5	23.6	5.3	23.4	26.2	6.2	23.4	28.8	6.1
Congestive Heart Failure.....	68	25.0	14.8	6.2	33.8	23.1	6.4	33.8	29.0	6.1
Pneumonia/Influenza.....	105	11.4	11.8	4.8	19.0	16.4	5.5	21.0	19.5	5.6
Chronic Obstructive Pulmonary Disease.....	28	3.6	6.8	-----	7.1	12.4	-----	10.7	16.8	-----
Transient Cerebral Ischemia.....	24	0.0	1.3	-----	0.0	2.9	-----	0.0	4.7	-----
Stroke.....	62	17.7	15.8	6.0	25.8	22.6	6.6	27.4	26.6	6.0
Hip Fracture.....	39	7.7	6.2	-----	7.7	10.8	-----	10.3	14.1	-----
Sepsis.....	16	25.0	25.2	-----	31.3	32.1	-----	43.8	36.6	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	6	0.0	6.8	-----	16.7	10.6	-----	16.7	12.5	-----
Carotid Endarterectomy.....	1	0.0	2.5	-----	0.0	4.4	-----	0.0	6.6	-----
Hip Replacement/Reconstruction.....	18	0.0	2.3	-----	0.0	4.4	-----	0.0	5.9	-----
Open Reduction of Hip Fracture.....	30	10.0	5.6	-----	10.0	10.1	-----	13.3	13.5	-----
Prostatectomy.....	94	0.0	0.7	-----	0.0	1.6	-----	0.0	2.9	-----
Cholecystectomy.....	46	2.2	2.0	-----	2.2	3.8	-----	4.3	5.1	-----
Hysterectomy.....	27	0.0	1.0	-----	3.7	2.2	-----	11.1	3.3	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (*) AND PREDICTED RANGE ($\pm 2 SD$) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



YAVAPAI REGIONAL MEDICAL CENTER
Medicare Provider Number: 030012

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:

Average age at admission..... 74.6 years

Proportion female..... 55.1 %

ADMISSION SOURCES/TYPES:

Referred by personal or HMO physician..... 51.0 %

Transferred from skilled nursing facility..... 0.0 %

Admitted for elective procedure..... 0.0 %

Admitted for emergency..... 55.5 %

COMORBIDITIES:

Cancer..... 7.5 %

Chronic cardiovascular disease..... 30.2 %

Chronic liver disease..... 0.5 %

Chronic renal disease..... 1.7 %

Chronic pulmonary disease..... 20.5 %

Cerebrovascular degeneration..... 3.4 %

Diabetes mellitus..... 4.7 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:

County/City 87.4%

State 8.6%

Outside State 4.0%

Total 100.0%

MEDICARE AVERAGE LENGTH OF STAY:

Hospital 4.9 Days

State 6.8 Days

National 8.6 Days

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:

Total Beds 84

Occupancy Rate 54.0 %

Ownership/Control..... Private, Non-Profit

Medicare Discharges 43.9 %

Case Mix Index (CMI) 1.1948

STAFFING:

Total Number of Physicians..... 64

Percent of Physicians Board Certified Specialists..... 84.4 %

Medical Residents/Interns 0

Registered Nurses..... 128

Licensed Practical Nurses 8

SPECIALTY SERVICES:

Burn Unit No

Cardiac Intensive Care No

Comprehensive Geriatric Yes

Hospice Care Yes

Medical/Surgical Intensive Care Yes

Organ/Tissue Transplant No

Other Intensive Care No

Trauma Center Yes

OTHER SPECIALTY/HOSPITAL-BASED SERVICES:

Alcohol/Drug No

Rehabilitation No

Psychiatric Yes

Medicare Swing Beds No

** Except for CMI

* Not used in calculating mortality rates

YUMA REGIONAL MEDICAL CENTER

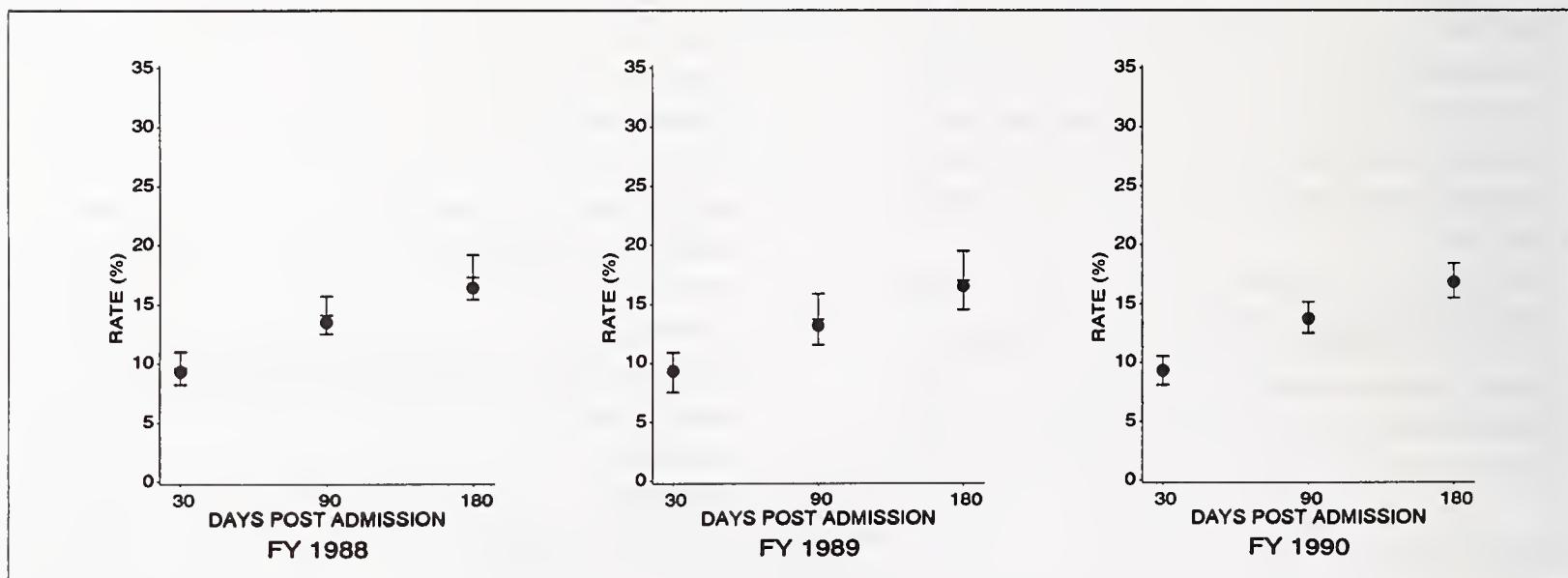
2400 AVENUE "A"
YUMA, AZ 85364
Medicare Provider Number: 030013

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	2737	9.3	9.3	0.6	13.7	13.8	0.7	16.8	16.9	0.7
CONDITIONS:										
Acute Myocardial Infarction.....	111	24.3	21.7	6.0	28.8	25.2	5.4	30.6	28.0	4.8
Congestive Heart Failure.....	118	16.1	12.5	5.5	21.2	19.9	5.8	28.0	25.3	5.3
Pneumonia/Influenza.....	183	13.7	15.1	3.4	17.5	20.8	4.8	20.8	24.3	5.2
Chronic Obstructive Pulmonary Disease.....	66	6.1	8.3	3.8	9.1	14.6	5.1	10.6	19.2	6.2
Transient Cerebral Ischemia.....	63	3.2	1.6	2.0	3.2	3.4	5.0	11.1	5.4	4.7
Stroke.....	92	17.4	22.7	6.2	25.0	28.2	7.7	30.4	31.5	7.2
Hip Fracture.....	71	4.2	5.8	4.2	11.3	10.4	3.9	12.7	13.5	4.2
Sepsis.....	13	15.4	24.5	-----	23.1	30.8	-----	23.1	35.8	-----
PROCEDURES:										
Angioplasty.....	0									
Coronary Artery Bypass Graft.....	0									
Initial Pacemaker Insertion.....	24	0.0	3.8	-----	8.3	6.9	-----	8.3	9.6	-----
Carotid Endarterectomy.....	4	0.0	1.1	-----	0.0	2.1	-----	0.0	3.1	-----
Hip Replacement/Reconstruction.....	27	3.7	3.2	-----	7.4	6.1	-----	7.4	8.3	-----
Open Reduction of Hip Fracture.....	43	2.3	5.1	-----	9.3	9.2	-----	11.6	12.2	-----
Prostatectomy.....	123	0.0	0.7	1.0	0.0	1.5	2.1	1.6	2.6	2.2
Cholecystectomy.....	45	6.7	2.7	-----	11.1	4.7	-----	13.3	6.1	-----
Hysterectomy.....	6	0.0	0.5	-----	16.7	1.0	-----	16.7	1.6	-----

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

OBSERVED MORTALITY RATE (•) AND PREDICTED RANGE (± 2 SD) FOR MEDICARE PATIENT ADMISSIONS FOR ALL CAUSES



YUMA REGIONAL MEDICAL CENTER
Medicare Provider Number: 030013

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:		COMORBIDITIES:	
Average age at admission.....	73.1 years	Cancer.....	6.1 %
Proportion female.....	44.4 %	Chronic cardiovascular disease.....	29.9 %
ADMISSION SOURCES/TYPES:		Chronic liver disease.....	
Referred by personal or HMO physician.....	34.6 %	Chronic renal disease.....	0.9 %
Transferred from skilled nursing facility.....	0.0 %	Chronic pulmonary disease.....	1.6 %
Admitted for elective procedure.....	13.3 %	Cerebrovascular degeneration.....	17.3 %
Admitted for emergency.....	65.4 %	Diabetes mellitus.....	3.6 %
			7.6 %

ORIGIN AND LENGTH OF STAY OF MEDICARE ADMISSIONS*

ORIGIN OF MEDICARE PATIENT ADMISSION:		MEDICARE AVERAGE LENGTH OF STAY:	
County/City	64.9%	Hospital	7.2 Days
State	2.4%	State	6.8 Days
Outside State	32.7%	National	8.6 Days
Total	100.0%		

HOSPITAL CHARACTERISTICS*

SOURCE: AHA Annual Survey of Hospitals** - Survey Year 1990

PROFILE:		SPECIALTY SERVICES:	
Total Beds	169	Burn Unit	No
Occupancy Rate	65.0 %	Cardiac Intensive Care	No
Ownership/Control.....	Private, Non-Profit	Comprehensive Geriatric	No
Medicare Discharges	36.5 %	Hospice Care	No
Case Mix Index (CMI)	1.1935	Medical/Surgical Intensive Care	Yes
STAFFING:		Organ/Tissue Transplant	
Total Number of Physicians.....	93	Other Intensive Care	
Percent of Physicians Board Certified Specialists.....	79.6 %	Trauma Center	
Medical Residents/Interns	0	OTHER SPECIALTY/HOSPITAL-BASED SERVICES:	
Registered Nurses.....	162	Alcohol/Drug	No
Licensed Practical Nurses	56	Rehabilitation	No
		Psychiatric	No
		Medicare Swing Beds	No

** Except for CMI

* Not used in calculating mortality rates

ARIZONA

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)								
		30 DAYS			90 DAYS			180 DAYS		
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	90,378	8.5	8.5	0.1	12.8	12.9	0.2	15.9	16.1	0.2
CONDITIONS:										
Acute Myocardial Infarction.....	2,864	23.5	24.6	1.0	27.2	27.6	1.2	29.6	30.2	1.1
Congestive Heart Failure.....	3,695	14.9	14.1	0.7	22.2	22.4	0.7	27.8	28.4	0.8
Pneumonia/Influenza.....	4,095	14.2	14.7	0.6	19.4	20.3	1.0	22.7	23.9	0.9
Chronic Obstructive Pulmonary Disease.....	1,720	9.3	7.8	0.8	15.3	13.5	1.0	21.2	17.9	1.3
Transient Cerebral Ischemia.....	1,059	2.5	1.6	0.7	4.6	3.6	1.1	6.9	5.9	1.2
Stroke.....	3,063	18.8	20.3	1.0	25.1	26.6	1.2	28.9	30.3	1.3
Hip Fracture.....	2,552	6.2	6.2	0.5	11.1	11.1	0.8	14.1	14.5	1.0
Sepsis.....	992	20.5	24.4	1.7	27.6	31.9	2.1	32.0	36.5	2.3
PROCEDURES:										
Angioplasty.....	1,027	3.4	3.4	0.8	4.0	4.4	1.0	4.7	5.4	1.2
Coronary Artery Bypass Graft.....	1,173	7.8	5.6	1.1	10.1	7.9	1.3	11.6	8.9	1.4
Initial Pacemaker Insertion.....	718	2.4	3.0	0.8	4.3	5.6	1.3	6.0	8.0	1.7
Carotid Endarterectomy.....	373	1.9	1.4	0.9	2.9	2.7	1.0	4.0	3.9	1.4
Hip Replacement/Reconstruction.....	2,216	3.1	2.7	0.6	5.9	5.1	0.8	7.1	6.8	0.6
Open Reduction of Hip Fracture.....	1,314	5.8	5.7	0.8	10.6	10.5	0.9	13.4	14.0	1.1
Prostatectomy.....	3,730	0.7	0.8	0.2	2.0	1.8	0.3	3.2	3.2	0.3
Cholecystectomy.....	2,040	2.3	2.4	0.7	4.4	4.5	1.0	5.9	6.0	1.0
Hysterectomy.....	869	0.8	0.6	0.6	1.2	1.3	0.6	2.1	2.1	0.8

* The Standard Deviation (SD) is not calculated if the number of deaths or cases is too small for satisfactory estimation.

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission.....	73.8 years
Proportion female.....	52.5 %
ADMISSION SOURCES/TYPES:	
Referred by personal or HMO physician.....	49.9 %
Transferred from skilled nursing facility.....	0.5 %
Admitted for elective procedure.....	24.6 %
Admitted for emergency.....	47.2 %
	Cancer.....
	7.2 %
	Chronic cardiovascular disease.....
	32.2 %
	Chronic liver disease.....
	1.0 %
	Chronic renal disease.....
	2.8 %
	Chronic pulmonary disease.....
	16.2 %
	Cerebrovascular degeneration.....
	3.2 %
	Diabetes mellitus.....
	7.0 %

ALL STATES

FY 1990 MEDICARE HOSPITAL MORTALITY RATES

CATEGORY	NUMBER OF CASES	MORTALITY RATES (%)											
		30 DAYS			90 DAYS			180 DAYS					
		OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*	OBS	PRED	SD*
ALL CAUSES.....	6,542,299	9.0	9.0	----	13.9	13.7	----	17.3	17.1	----			
CONDITIONS:													
Acute Myocardial Infarction.....	204,673	25.3	25.6	----	29.5	28.7	----	32.1	31.4	----			
Congestive Heart Failure.....	335,426	14.3	14.4	----	22.9	22.8	----	29.2	29.0	----			
Pneumonia/Influenza.....	313,303	15.3	15.5	----	21.5	21.3	----	25.5	25.1	----			
Chronic Obstructive Pulmonary Disease.....	107,387	8.0	8.0	----	14.1	14.0	----	18.7	18.5	----			
Transient Cerebral Ischemia.....	96,866	1.8	1.8	----	4.0	4.0	----	6.4	6.5	----			
Stroke.....	241,803	19.7	19.8	----	26.5	26.3	----	30.4	30.0	----			
Hip Fracture.....	163,386	6.7	6.5	----	11.7	11.5	----	15.1	15.0	----			
Sepsis.....	80,999	25.6	25.7	----	34.6	33.8	----	39.8	38.6	----			
PROCEDURES:													
Angioplasty.....	58,026	3.0	3.0	----	4.0	4.0	----	5.0	4.9	----			
Coronary Artery Bypass Graft.....	80,798	6.0	5.7	----	8.3	8.1	----	9.5	9.2	----			
Initial Pacemaker Insertion.....	49,642	3.2	3.3	----	6.5	6.3	----	9.1	9.1	----			
Carotid Endarterectomy.....	29,990	1.6	1.5	----	2.8	2.8	----	4.0	4.1	----			
Hip Replacement/Reconstruction.....	122,156	3.4	3.2	----	6.2	5.9	----	8.1	8.0	----			
Open Reduction of Hip Fracture.....	80,075	6.1	6.0	----	11.2	11.0	----	14.5	14.5	----			
Prostatectomy.....	211,087	0.9	1.0	----	2.2	2.3	----	3.7	3.8	----			
Cholecystectomy.....	124,259	2.9	2.7	----	5.0	4.9	----	6.5	6.5	----			
Hysterectomy.....	53,905	0.7	0.7	----	1.4	1.5	----	2.2	2.4	----			

* The Standard Deviation (SD) is not calculated.

FY1990 VALUES FOR SELECTED EXPLANATORY FACTORS USED TO PREDICT MORTALITY RATES

DEMOGRAPHICS:	COMORBIDITIES:
Average age at admission.....	74.1 years
Proportion female.....	55.9 %
ADMISSION SOURCES/TYPES:	
Referred by personal or HMO physician.....	46.1 %
Transferred from skilled nursing facility.....	1.1 %
Admitted for elective procedure.....	22.0 %
Admitted for emergency.....	46.5 %
	Cancer..... 7.6 %
	Chronic cardiovascular disease..... 36.6 %
	Chronic liver disease..... 1.0 %
	Chronic renal disease..... 3.4 %
	Chronic pulmonary disease..... 15.0 %
	Cerebrovascular degeneration..... 3.9 %
	Diabetes mellitus..... 8.0 %



Hospital Comments



Del E. Webb Memorial Hospital

14502 West Meeker Boulevard
P.O. Box 5169
Sun City West, AZ 85375
(602) 931-9322

March 18, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
ATTN: Robert Moore

Dear Dr. Wilensky:

The following comments are submitted in response to the published FY 1990 Medicare Hospital Mortality Rates for Del E. Webb Memorial Hospital (Medicare Provider #030093).

Our interpretation of the published data is to recognize that our observed mortality rates for "all causes" at 30 day, 90 day and 180 day levels are lower than the predicted mortality rate. Other than that stated above, we feel no other conclusions can be drawn from the data because there is an inadequate sample size for the specific conditions and procedures listed. Each specific procedure and condition listed in the report contains reference to the fact that it is impossible to calculate a standard deviation due to inadequate sample size and, therefore, this renders the data uninterpretable. When an adequate sample size is not available one cannot know whether there is a statistically significant difference between the observed and predicted rates.

With the exception of drawing conclusions from the data where none can be drawn, we have no objections to the data presented.

Sincerely,

A handwritten signature in black ink that appears to read "Tom Dickson".

Thomas C. Dickson
Executive Vice President

TCD:rc

cc: Leland W. Peterson, President
Sun Health Corporation



March 19, 1992

Medicare Provider Number 030009

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

ATTN: Robert Moore

Kino Community Hospital (KCH) had an observed mortality rate that fell within the normal predicted range for all three time periods in the FY 1990 HCFA hospital mortality study. KCH patients are typically quite elderly and very ill, as the Medicare demographics characteristics and casemix index reported in the Study.

Based upon the data available to KCH, 55% of the Medicare deaths occurred in the emergency room. These patients were either in extreme terminal distress when they arrived at the emergency room (ER) or had already expired prior to, or on arrival. Although counted by HCFA as Medicare admissions, unfortunately none of the 55% received inpatient care since they were admitted to the KCH ER, where they expired.

Based upon the KCH analysis, the remaining 45% (or 89) of Medicare deaths, 11 occurred in patients who had "do not resuscitate" directions on their charts. These patients were receiving "comfort care", with express orders not to use heroic measures in light of their conditions.

This group of 89 Medicare inpatients were at unusually high risk of dying. One-third were admitted to KCH (through its ER) from skilled nursing facilities. The medical literature reports that Medicare patients admitted from nursing homes tend to be at significantly greater risk of dying (Green, et.al. Analyzing

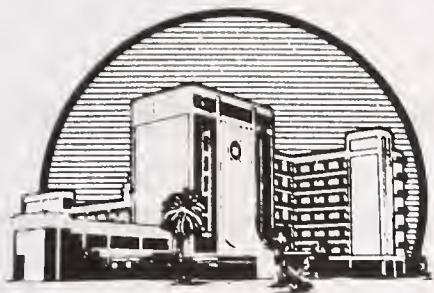
Medicare Provider Number 030009

Hospital Mortality. J.A.M.A. 1991 265:1849-1853). Three-fourths of these patients had comorbidities of at least 2 or more complicating diseases. As a final point, one-third were over 85 years old.

Respectfully Submitted,

Gregory G. Zobell

Gregory Zobell
Chief Executive Officer



MARICOPA MEDICAL CENTER

2601 EAST ROOSEVELT P.O. BOX 5099 PHOENIX, ARIZONA 85010 (602) 267-5011
FAX (602) 267-5450

Medicare Provider #: 030022

March 16, 1992

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

Dear Dr. Wilensky:

The FY 1989 and 1990 predicted mortality rates for Maricopa Medical Center likely are inaccurate as a result of incorrect hospital coding practices that were discovered and corrected in March, 1990. The effect of these coding errors is to significantly underestimate our hospital's predicted mortality rate.

Since early 1990, members of your staff and representatives from our hospital have been attempting to identify a way to resolve this situation in a mutually acceptable manner. Until these inaccurate data elements are corrected, however, interpretation of Maricopa Medical Center's Medicare mortality data will continue to be extremely difficult at best.

Sincerely,

Anthony D. Rodgers
Chief Executive Officer
Maricopa Medical Center

GRY/MAS 1195.LTR



NAVAPACHE HOSPITAL

2200 Show Low Lake Rd. • Show Low, Arizona 85901
(602) 537-4375
Fax. (602) 537-8358

March 13, 1992

Medicare Provider No: 030062

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
ATTN: Robert Moore

Dear Mr. Moore:

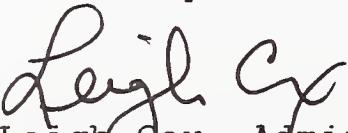
The Quality Improvement and Utilization Review Departments of Navapache Hospital have reviewed the 1990 Medicare Mortality data for our hospital. We appreciate the opportunity to evaluate and comment on this report prior to its release.

Validation of the data has demonstrated it to be essentially correct; however, because the numbers of deaths in any category are too small to estimate the standard deviation, the value of comparing observed to predicted mortality is limited as a valid means of evaluating quality of care. ICD-9-CM codes are a method of classifying diseases and procedures by number - they do not reflect severity of illness. Only after a thorough review of the medical record can treatment effectiveness and quality of care be determined.

Be assured that Navapache Hospital has comprehensive Quality Management program that includes peer review by our medical staff of medical records on an ongoing basis. We continually strive to improve quality in the delivery of services that are offered at our facility.

Thank you again for the opportunity to comment on this report.

Sincerely,


Leigh Cox, Administrator
Navapache Hospital

PHOENIX BAPTIST HOSPITAL AND MEDICAL CENTER

6025 North 20th Avenue / Phoenix, Arizona 85015 / (602) 249-0212



PROVIDER 030030

March 17, 1992

To All Interested Parties:

Phoenix Baptist Hospital and Medical Center is a 240 bed community hospital with over 800 physicians on staff; approximately 80% of these are board certified in their chosen specialties. We have a well established Quality Improvement Program in place which analyzes and acts on this type of information to provide for continuous improvement in many important aspects of patient care.

Aggregate data from the last 3 years shows a normal spread of occurrences with no diagnosis or procedure showing significant statistical anomaly for any extended period of time. All categories with a sufficient number of cases to derive this information fell within 2 standard deviations of HCFA's predicted mortality rate. Though the information is favorable, we still have objections to its presentation as it is currently practiced.

First, the data base itself is based on a coding system that was originally devised to catalogue diseases and was never designed to yield meaningful information regarding the patient's actual severity of illness within that disease. Furthermore, subsequent modifications to this system have been primarily aimed at better defining hospital payment rates and NOT more accurate measurement of severity and risk. Thus there is a large amount of intrinsic error built into the risk adjusting aspect of the model at its very foundation.

Second, as it is currently presented, the information invites a large amount of misunderstanding by the public:

1. People see the information and tend to conclude it applies to the hospital's entire patient population, when in fact the hospital's overall rate in a given area is usually dramatically different from the rate based only on its Medicare population.
2. Providing percentages based on extremely small volumes and comparing them to a predicted percentage based on national volumes is very misleading. If a hospital has only 25 Medicare cases of a certain type, and 2 of those patients expire, this is reported as an "observed mortality rate of

PROVIDER 030030

8.0%". It is then stated that the "predicted" mortality for that procedure is 0.7%. Are people supposed to conclude that the hospital's mortality rate for that procedure is 10 or 11 times what it should be? Of course not. If you go three years without getting a flat tire and then get 2 in the same week, what is your conclusion? Most people would conclude that it was just one of those odd things. But if this same information is stated "the rate of tire failure in this 1 week period was 50%", we have something to be concerned about. Unfortunately, the data array lends itself to this type of gross misinterpretation. The fact is that these figures, dealing with volumes this small, are simply not in the realm of statistical significance. To report them at all, even with disclaimers, is not necessarily helpful or informative.

We recognize that the public needs to be able to identify quality in their health care system. Devising meaningful methods of doing so will be one of the biggest challenges facing us in the next decade; we hope that efforts to address this need are well-considered. Attempts to pass off hasty and ill-advised methods of measure as guides to quality can only damage legitimate efforts in this needy area.

Sincerely,



Kevin E. Nolan
Executive Vice President



Carondelet St. Mary's

March 16, 1991

Medicare Provider Number: 030010

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
ATTN: Robert Moore

Dear Mr. Moore:

We appreciate the efforts of the Health Care Financing Administration in its latest release of the Medicare Hospital Mortality Rates. We are pleased to see that our observed overall mortality rate compares favorably with the predicted rate. In the area of coronary artery bypass surgery, however, we feel that a detailing of specific factors is important in order to explain the observed mortality rate.

We have reviewed our cases, and find that, as with previous reports, the results can best be understood by taking into account patient selection. We believe that with the increase in the number of angioplasty procedures, those patients moving on to CABG tend to be at somewhat higher risk. Over the last three reporting years, the number of angioplasties at our hospital increased from 82 to 112, while at the same time the number of CABG's decreased from 97 down to 86.

To further evaluate whether we were looking at a high risk population we subjected our entire FY90 CABG population to a recognized risk assessment methodology. The details of this methodology are found in "A Method of Uniform Stratification of Risk for Evaluating the Results of Surgery in Acquired Adult Heart Disease", Parsonnet, et.al., Supplement I, Circulation, Vol 79, No 6, June 1989. In an additive method, risk is assigned to each of 17 statistically verified factors, which include female gender, morbid obesity, diabetes, hypertension, ejection fraction, age, reoperation, preoperative aortic balloon pump, left ventricular aneurysm, emergency surgery following PTCA or catheterization complications, dialysis dependency, catastrophic states (including cardiogenic shock), other rare conditions, CABG with valve surgery further stratified by pressures measured at catheterization.

1601 West
St. Mary's
Road

P. O. Box
5386

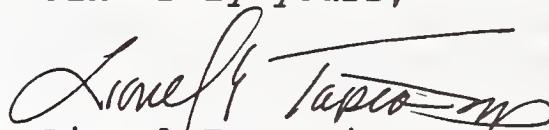
Tucson
Arizona
85703

(602)
622-5833

By the described method, we calculated an overall predicted operative mortality risk of 16% which compares with our 17.4% observed rate. Further, when we looked specifically at the group of patients that died, they had a 35.5% predicted operative risk. Of the patients that died within the 30 day interval, their operative risk was 41.6%. Of this latter group, 8 of 15 were classified as emergent/salvage procedures with an preoperative anesthetic risk classification of V (moribund, not expected to survive 24 hours with or without surgery). If this latter group of patients is eliminated from the calculation, the resultant observed mortality rate would have been 8.1% which compares favorably with the HCFA predicted mortality rate of 6.7 (S.D. 4.1).

Clearly, we are caring for a high risk population. We are constantly reviewing our surgical cases with the intent of improving outcomes. One area that can not be overlooked is that of the number of extremely ill patients going to surgery. This is an area of ongoing assessment, which requires the cooperation of cardiologist, surgeon, and most importantly, the patient.

Sincerely yours,



Lionel E. Tapia, M.D.
DIrector of Medical Affairs



Lutheran Healthcare Network

Valley Lutheran Hospital
6644 Baywood Avenue
Mesa, Arizona 85206
(602) 981-2000

March 16, 1992

Medicare Provider
#030088

To: Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187

ATTN: Robert Moore

From: Thomas F. Spindler, Administrator
Valley Lutheran Hospital

Re: Valley Lutheran Hospital
HCFA Mortality Data

This memo was prepared to accompany the release of the Health Care Financing Administration (HCFA) mortality data relevant to Valley Lutheran Hospital.

Our facility is interested in the fact that each year HCFA has revised the methodology for evaluating mortality. We realize the data findings are efforts by HCFA to improve quality and effectiveness of medical practice and that the mortality information may be used as a screen for an area that potentially needs closer evaluation. We feel that it is very important to point out that the mortality findings do not explain why a hospital is outside the standard deviation of a predicted range. It is also important to point out that the mortality findings over time (30, 90 and 180 days) do not explain a disease and the different treatment modalities used to effect the final outcome. Valley Lutheran Hospital used MEDSGRPS severity index system to explain the effect and final outcome of all patients treated during the time frame of October 1989 - September 1990.

We reviewed all Medicare patients (322) who expired while in our facility during the specified time. Our findings revealed that 81.1% of the 322 patients had a "No Code" status prior to expiration and were expected deaths. We also used the MEDSGRPS severity index system to evaluate every patient who expired.

March 16, 1992
Page 2

Medicare Provider
#030088

This system uses clinical findings to determine how ill a patient is upon admission. The scale used by this system ranges from zero to four, zero meaning few objective findings found and four meaning critical findings present and the patient is likely to die. The admission severity mean for all 322 patients was 2.61. Thus, these patients had documented clinical findings which could have resulted in death.

CONCLUSION

We feel that HCFA's mortality findings may have a limited use as a screening tool for potential areas that may need further analysis. The MEDSGRPS severity index system helps Valley Lutheran Hospital to provide the additional data needed for such an analysis.

In closing, please note that Valley Lutheran Hospital has a Quality Management program that is systematic, planned and ongoing which reviews each patient's hospitalization. The program reviews numerous key factors to protect our patients from a negative outcome. This program also provides a mechanism to improve the quality of care rendered.

Thank you for the opportunity to address this issue.

Sincerely,



Thomas F. Spindler, Administrator

/rm

Vencor Hospital • Phoenix

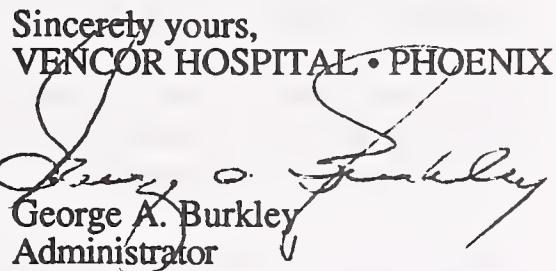
12207 North 113th Avenue
Youngtown, Arizona 85363
(602) 933-0155
(602) 876-3296 Fax

March 16, 1992

Valley View Community Hospital ID: 030057

Gail R. Wilensky, Ph.D., Administrator
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
ATTN: Robert Moore

The Medicare Hospital Information - 1992 for Valley View Community Hospital, Youngtown, Arizona reflects short-term acute care patient activity prior to Vencor, Incorporated's acquisition of this facility. Vencor, Incorporated operates hospitals nationwide which specialize in treatment of the catastrophically ill. Vencor, Incorporated now operates this facility under the name Vencor Hospital • Phoenix. This facility has not operated as a short-term, acute care hospital since March 2, 1990.

Sincerely yours,
VENCOR HOSPITAL • PHOENIX

George A. Burkley
Administrator



Walter O. Boswell Memorial Hospital

10401 West Thunderbird Boulevard
P.O. Box 1690, Sun City, AZ 85372
(602) 977-7211

March 16, 1992

Gail R. Wilensky, Ph.D., Administration
Health Care Financing Administration
Medicare Hospital Information
Bureau of Data Management and Strategy
Room 3-A-12, Security Office Park Building
6325 Security Boulevard
Baltimore, Maryland 21207-5187
Attn: Robert Moore

Dear Mr. Moore:

We appreciate the opportunity to review and comment on Health Care Financing Administration's 1990 Medicare mortality data and hospital profile characteristics. Recognizing that patient mortality is a critical component (yet not the only component) within quality of care measurement, we had considerable interest in the data's release. Subsequent to review, we were pleased to see that rates for "all causes of death" were well below that predicted, and that the difference between observed and predicted have displayed steady improvement.

While we intend to use this data in our quality management program as a means of identifying areas on which to focus review efforts, we would like to address several areas that potentially could affect data interpretation.

First, the actual number of Medicare patients discharged in 1990 from Boswell Memorial Hospital was 10,227 as compared to your total number of cases of 7,147.

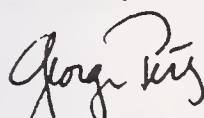
Also, within the "General Review of Mortality Information" provided, you state that the precision and interpretability of estimates may be questionable when the standard deviation cannot be calculated. Even with the standard deviation, the information can be misleading as is witnessed by the following example. For hysterectomies, Boswell Memorial Hospital's observed rate is 1.8 and the predicted rate 0.8. Due to the ability to calculate a standard deviation, the rate is deemed to have some predictive value, despite only one death occurring within the 56 cases presented. Such small volume extrapolations cause obvious concerns when utilized to interpret the data.

In the April 15, 1991 issue of *Modern Healthcare*, an article titled "Patient Mix Often Explains High Mortality Rate-Study" cites a study conducted by researchers at NYU Medical Center and UCLA Medical Center which was published in the April 10 issue of the Journal of the American Medical Association. The study found that in many cases, it is the difference in patient mix, not quality of care problems, that account for high mortality. For example, hospitals with the oldest patients were twice as likely to be flagged as so called "mortality outliers". The average age of a Medicare patient at Boswell Memorial Hospital is 77.3 years.

It is also important to note that the care delivered by the hospital is but a small part of a patient's total healthcare experience. Some other elements that should be considered include the patient's history of preventative care, pre-hospital condition and access to healthcare, and adherence to physician treatment regimen. In the above quoted article, the researchers found that hospitals with the sickest patients were six times more likely to be flagged as mortality outliers than facilities treating the healthiest patients.

Thank you for considering our remarks. We commend your continued efforts toward improving the quality of healthcare.

Sincerely,


George Perez
Executive Vice President

GP\CF\BK\cf
:HCFA

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